



# ***WAIVER AND RELEASE OF LIABILITY***

***THE FREE METHODIST CHURCH OF NORTH AMERICA  
VOLUNTEERS IN SERVICE ABROAD  
INDIANAPOLIS, INDIANA***

## **Release for a Minor Child**

I, the undersigned, a person at least 18 years of age, am the parent or guardian of the minor child named below, and that child desires to voluntarily participate in a program sponsored by Volunteers In Service Abroad (VISA), an agency of the Department of World Missions of the Free Methodist Church of North America, a California corporation (FMCNA). The program ("Program") involves traveling to the country of \_\_\_\_\_ on the dates of \_\_\_\_\_. I am providing for my child's financial needs and support on the Program.

I assume all responsibility and risk for any sickness, accidents or other mishaps, including, but not limited to, serious bodily injury, permanent disability, and/or death, that may result to my child on this Program. In connection with my child's participation in the Program, I, individually, and as parent or guardian of my minor child, hereby waive the right to any claim, cause of action, and/or the right to file a law suit against FMCNA, any local Free Methodist Church, any Conference of FMCNA, or against any such organizations' departments or entities, including VISA, or against the directors, officers, sponsors, employees, agents, volunteers, successors and assigns of any such organization. I, individually, and as parent or guardian of my minor child, further release all such organizations and/or persons from any and all responsibility or liability of any nature whatsoever for any loss or damage to my minor child's person or property, including, but not limited to, personal injury and/or death sustained on the Program, unless such loss, damage, etc., is due to the intentional or willful act of such organization or person.

This Waiver and Release of Liability is binding upon my and my child's personal representatives, trustees, heirs, successors, beneficiaries, relatives, next of kin or assigns and shall inure to the benefit of all organizations named herein as well as to their directors, officers, sponsors, employees, agents, volunteers, successors and assigns.

If any provision of this document is held to be invalid or unenforceable, this form shall be construed as if the invalid or unenforceable provision was not contained in the document.

**I have carefully read this Waiver and Release of Liability. By my signature, I am stating that I understand, agree to, and accept all of its provisions, and understand that I am giving away substantial legal rights for both myself and, if I am signing for my child, for my child.**

For \_\_\_\_\_ Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

(Minor Child)

Both parents/guardians should sign below, or if divorced or separated, the custodial parent.

\_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
(Printed Name)

## **THIS FORM MUST BE NOTARIZED**

Subscribed and sworn to before me this date \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Signature

Notary Public in \_\_\_\_\_ County

State of \_\_\_\_\_

\_\_\_\_\_  
Printed Name

My Commission Expires \_\_\_\_\_