

Waiver of Liability Form

EFC East Valley • *All persons attending are required to fill out this form. Minors must have legal guardian sign.*

Authorization to Participate

I, _____, am

- the parent or legal guardian of the following minors
- am the non-minor person (18 years or older) listed below

Name of Minor(s)	Health Provider	Medical Policy Number	☎ Health Provider Phone
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I affirm that the persons listed above have no health problems that prevents them from participation in this event, and I authorize them to attend _____.

Authorization of Necessary Medical Care

I give EFC East Valley (hereafter EFC EV) and its agents, permission to authorize for the minors or for myself listed above any necessary medical care rendered by a physician licensed under the Medical Practice Act. I authorize the facility which has provided treatment to surrender physical custody of these minors to EFC EV upon completion of treatment.

Assumption of Risk

Some of the risks involved with this event and transportation to and from this retreat include but are not limited to: minor injuries such as scrapes or bruises; serious injuries such as broken bones or concussion; or even catastrophic events such as paralysis, loss of limb, or death. By signing this legal document, I understand and appreciate the potential risks involved, and I agree to assume responsibility of these risks for the minors above or for myself.

Submission to Rules and Authority

I/we agree to submit to all EFC EV rules, regulations, and appointed authority. I/we will follow the schedule and attend all scheduled meetings and activities.

Waiver of Liability

本人(或家長代表)同意遵守短宣的各項規定，並和短宣負責人員合作。特別是下列各項：按照時間表出席各項聚會。未經本人書面同意或陪同，不得擅自離場地。不準繫帶武器或非法藥物。家長或監護人須於註冊表簽名。同意若遭遇任何意外傷害，均與大會無關。

In consideration of the possible risks involved, I hereby release EFC EV and its agents from any and all claims, whether legal or financial, that may arise or be caused by transportation to or from EFC EV, use of EFC EV and destination facilities or properties, ordinary negligence of the provider, or involvement with this event during the dates specified above. This release is signed on behalf of the signer, spouse, heirs, administrators and assigns as a covenant to not sue in the event of injury, loss, or death.

父母或監護人

Guardian Signature: _____

電話 Phone: _____

緊急情況請聯絡

Emergency Contact: _____

電話 Phone: _____

簽名

Applicant Signature: _____

簽名

Applicant Signature: _____

簽名

Applicant Signature: _____

日期 Date: _____