

**LILLIAN METHODIST CHURCH
CHILDREN and YOUTH MINISTRIES
WAIVER and RELEASE OF LIABILITY**

I, _____ (Parent/Guardians),
ON BEHALF OF MYSELF AND MY CHILD/CHILDREN, HEREBY ASSUME ALL
OF THE RISKS OF REQUESTING THIS SERVICE, including by way of example and
not limitation, any risks that may arise from contracting COVID-19 from the Lillian
Methodist Church (hereinafter called “LMC”) and from any negligence or carelessness on
the part of LMC and I hereby release and discharge LMC from any and all liability for and
from any medical condition, including viral infection which may arise from my child’s
participation in any Children and Youth Ministries programs provided by LMC. This Waiver
and Release of Liability covers any negligence or carelessness in relation to exposing me or
my child/children to the COVID-19 virus from LMC while providing such services.

I understand that there are risks of viral infections that cannot be avoided, even by
compliance with the recommendations of governmental authorities. I also understand that
social distancing may not be possible or practical in dealing with children and youth in group
settings. I also understand that there will be other children/teens and adults coming into
contact with my child/children/teen and that viral infections, including COVID-19, may be
transmitted by such contact.

I understand that I am responsible for determining whether I and/or my child/children/teen
are physically and medically able to allow my child/children/teen to participate in any
Children and Youth Ministries programs. I am responsible for determining whether a
physical or medical examination should be undertaken before I or my dependents participate
in the services being provided by LMC and I will abide by any determination, limitation, or
recommendation that may be issued by my medical or health care provider. Before, during,
and after the services, I am solely responsible for determining mine and my children’s health
and physical status and whether I or my child/children/teen can or should discontinue our
participation in the services, or take other actions, to protect my own, and my children’s,
health or safety. LMC assumes no Responsibility to me or my children to ensure the medical
ability to participate in the LMC programs, whether before, during, or after the said
programs.

I acknowledge that this Waiver and Release of Liability Form will govern my actions and
responsibilities at said programs, services, activity, or event.

In consideration of providing services to me and/or my dependents, I hereby take action for
myself, dependents, my executors, administrators, heirs, next of kin, successors, and assigns
as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, illness, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this event, **THE FOLLOWING ENTITIES OR PERSONS:** LUMC and its trustees, officers, employees, program staff, pastor, administrative staff, volunteers, representatives and agents;

(B) I INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this service, activity or event, whether caused by the negligence of said persons or otherwise. Mine and my child/children's/teens participation in the services and programs of LMC is voluntary.

I acknowledge that neither LMC nor its trustees, officers, employees, representatives, and agents shall be responsible for the contamination, errors, omissions, acts, or failures to act of any party or entity conducting in providing the services.

The accident waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

ON BEHALF OF MYSELF AND MY DEPENDENTS

Print Name: _____

Date: _____

Signature: _____

List Children: _____
