

MINOR GENERAL RELEASE AND HOLD HARMLESS AGREEMENT

I, \_\_\_\_\_ am the parent or legal guardian of \_\_\_\_\_ (the “minor”), who desires to participate in various programs, events or activities (hereinafter collectively referred to as the “Activities”) operated or sponsored by Asbury United Methodist Church, 6690 Cahaba Valley Road, Birmingham, AL 35242 (hereinafter referred to as the “Church”).

I understand and acknowledge that the Church will not allow the minor to participate in the Activities without releasing and holding the Church harmless from any liability arising out of my participation in the Activities. I have investigated the risks involved in the minor’s participation in the Activities and fully understand and assume such risks on his or her behalf. Specifically, I understand and acknowledge that the minor may suffer or experience, among other things, personal injury or bodily damage, medical disabilities, loss or theft of personal property, and even death.

I REQUEST THAT THE CHURCH ALLOW THE MINOR TO PARTICIPATE IN THE ACTIVITIES, AND IN CONSIDERATION THEREOF AGREE HEREBY TO RELEASE AND FOREVER DISCHARGE THE CHURCH, ITS OFFICERS, AND DIRECTORS, AND ITS EMPLOYEES, AGENTS, AND ANY PARTIES VOLUNTEERING ON BEHALF OF THE CHURCH, FROM ALL ACTIONS, CAUSES OF ACTION, INJURIES, CLAIMS, DAMAGES, COSTS OR EXPENSES OF ANY KIND GROWING OUT OF OR RELATED TO ANY SUCH ACTIVITIES IN WHICH THE MINOR PARTICIPATES. I UNDERSTAND THAT THIS IS A FULL AND COMPLETE RELEASE OF ALL INJURIES AND DAMAGES WHICH I OR THE MINOR MAY SUSTAIN AS A RESULT OF HIS OR HER PARTICIPATION IN ANY ACTIVITIES, REGARDLESS OF THE SPECIFIC CAUSE THEREOF.

I further acknowledge and agree that I have given my consent for the minor to remain in the custody of the Church’s representatives while participating in the Activities. I grant Asbury permission to publish my child’s photo on the website, brochures and/or any social media account for promotional purposes. I understand that if I wish to change this decision, I must do so in writing.

Pick-Up Information:

Your child’s safety is our top priority. When picking up your child, please park and come into the building. Please complete the following information:

- Who will be picking up this child from Asbury activities? (Include all family members and carpool drivers.) \_\_\_\_\_
- In case of emergency, who is authorized to pick up this child from Asbury activities?  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_

This Agreement is binding on the minor’s heirs, successors, and personal representatives.

Dated: \_\_\_\_\_ Signed: \_\_\_\_\_

On behalf of the minor

Dated: \_\_\_\_\_ Signed: \_\_\_\_\_

Parent – Individually