

LIABILITY WAIVER (ADULT)
Church of St Raphael - HUNGER 2019 at St. Bonaventure
PLEASE RETURN BY JAN. 23, 2018

Info Meeting on this day at 6:00 PM in Marian Hall

Each adult participant, including group leaders and chaperons, must sign this form.

FIELD TRIP VOLUNTEER RELEASE FORM

Assumption of Risk and Indemnity Agreement

Please let us know your T-Shirt Size: S, M, L, XL, XXL, XXXL

Date of Event/Field Trip: **HUNGER (Mar. 8-9, 2019)**

Type of Field Trip: **HUNGER 2019**

Destination: **St. Bonaventure / Feed My Starving Children - Eagan / Other Service Locations TBA**

Mode of Transportation: **Carpooling or busing**

Student Cost: **\$15.00 per participant (\$30.00 Family Max)**

Individual(s) in Charge: **Anna Scherber / Josh Stegman**

Time: **Fri. Mar. 8 at 5:00 PM / 7:00 PM on Sat. Mar. 9**

The undersigned person volunteers to serve as a chaperone for the above-described activity/field trip.

The undersigned, his/her personal representatives, heirs and assigns, DO HEREBY:

1. RELEASE, DISCHARGE AND COVENANT NOT TO SUE the Church of St. Raphael, participating parishes, and the Archdiocese of St. Paul/Minneapolis, MN for any and all claims and liability, except for those arising out of the strict liability or negligence of releasee which causes the undersigned injury, death or property damage and further agrees to hold releasee harmless and indemnify releasee from any claim, judgment or expense releasee may incur by participation in the described activity/field trip.
2. UNDERSTAND that participation in the described activity/field trip involves danger and risk of injury. The inherent danger is understood and voluntarily assumed.

I HAVE READ THIS DOCUMENT. I UNDERSTAND IT IS A RELEASE OF ALL CLAIMS. I UNDERSTAND I ASSUME ALL RISK INHERENT IN THIS ACTIVITY. I VOLUNTARILY SIGN MY NAME EVIDENCING MY ACCEPTANCE OF THESE PROVISIONS.

Printed Name

Date Signed

Signature

21 and Older:

_____ YES I CAN HELP WITH DRIVING

_____ Number of passengers / Vehicle Type: Van Car Truck/SUV