

TREE (The Retreat Experience) **CONSENT AND RELEASE Form**

(Ages 17 and under must submit a signed form) **Page 1 of 2**

I promise to obey the rules and regulations of the Retreat Center, & Love Ministries. I will cooperate with the directors, sponsors and leaders.

I am attending with the _____ Church/Organization

Attendee's Name _____ Sex: _____ Age _____ Grade _____

Birth Date _____ Address _____

City _____ State _____ Zip _____

Are you a Christian? _____ Church Member? _____

Membership where? _____

Dates for the required immunizations for the following: **DATES ARE REQUIRED**

Polio _____ DPT _____ Measles _____ Mumps _____

Rubella _____

List allergies:

Medication now
being taken?

Family Physician: _____ Physician Phone: _____

Parent/Guardian's Insurance Policy # _____

Insurance Company Name _____

Insurance Address _____ Insurance Phone _____

Ins City _____ Ins State _____ Ins Zip _____

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Activities I do not wish
my child to participate
in include:

Telephone # in case of emergency: Home _____

Telephone # in case of emergency: Office _____

Telephone # in case of emergency: Cell _____

I, the undersigned parent or guardian, hereby consent to my child participating in activities of the retreat camp, a ministry sponsored by Love Ministries. I do hereby indemnify and hold harmless, Love Ministries while traveling to and from the retreat, the Camp site, and their sponsors, officers, drivers, directors, volunteers and representatives from and against any and all liability, damages, actions, causes of action, claims, losses and or expenses, including but not limited to attorneys fees, court costs and expenses, arising in connection with or based on injury to or death of any persons or property, including the loss of use thereof, caused in whole or in part by any member of the Group or the Group Leadership. I expressly agree that this release, waiver and indemnity agreement is intended to be broad and inclusive as permitted by the law of the State of Texas. I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement, which I have read and have understood.

Attendee's Social Security # _____

Attendee's Signature _____

Signature of Parent or Legal Guardian: _____

Date _____