Explore Church Youth Participation Agreement PO Box 336, Frenchtown, MT 59834 406-241-8738

Coordinator: Sacha Hasenyager	
Description of activity: Glacier/Kalispell trip for youth 6^{th} to 12^{th} gr	Dates: May 14 th to 15 th
Participant Information:	
Name of Participant:	
Age of Participant: Grade:	
Name of parents/guardians:	
Address:	_ Phone:
Name of emergency contact:	Day Phone:
Night phone:	
List allergies/medical conditions:	
·· <u> </u>	Yes No
Is participant covered by personal/family medical insurance?	
If yes, name of insurer:	
Policy or group number:	
Participation Agreement I acknowledge that participation in the activity describe the participant's parents or guardians, if the participant is a minor), and may resulimited to, the following: sickness, bodily injury, death, emotional injury, personal damage. In consideration for the opportunity to participate in the activity describe parent/guardian if the participant is a minor) acknowledges and accepts the risks transportation to and from the activity. The participant (or parent/guardian) access injury or other loss sustained during the activity or during transportation to and freatment rendered to the participant that is authorized by the sponsor or its agreepresentatives (collectively referred to as the "activity sponsor"). Further, the participant is indemnify, defend, and hold harmless the activity sponsor for any indescribed activity or transportation to and from the activity, whether such injury sponsor, the participant, or otherwise. If a dispute over this agreement or any claparent/guardian) agrees to resolve the matter through a mutually acceptable alto participant (or parent/guardian) and the activity sponsor cannot agree upon such three-member arbitration panel for resolution in accordance with the rules of the	alt in various types of injury including, but not all injury, property damage, and financial bed above (the "activity"), the participant (or of injury associated with participation in and epts personal financial responsibility for any from the activity, as well as for any medical ents, employees, volunteers, or any other articipant (or parent/guardian) releases and jury arising directly or indirectly out of the arises out of the negligence of the activity him for damages arises, the participant (or ernative dispute resolution process. If the na process, the dispute will be submitted to a
Signature:	Date: