

Grace Covenant Academy Student Waiver

Event _____ Date _____

Name of Student: _____ Grade _____

Name of Parent(s): _____ Phone #1 _____

Phone #2: _____ Phone #3: _____

Grace Covenant Academy, a Texas non-profit corporation, is designated by the abbreviation "GCA" throughout this form. The terms "child" and "minor" listed below shall refer to the above mentioned participant.

GENERAL

- I am the parent or legal guardian of the participant named above, who is a minor.
- I hereby give permission for my child to attend and participate in activities sponsored by GCA.

INDEMNITY

- I hereby agree to indemnify and hold harmless GCA and its affiliates, and all of their officers, directors, ministers, teachers, agents, contractors, employees, successors, assigns, and volunteers (collectively, the "Released Parties") from any claims, demands, liabilities, actions, suits, or proceedings arising directly or indirectly out of Minor's participation in the event. I (we) agree to bear all costs including attorneys' fees, litigation costs, expenses, or judgments resulting from any claims or lawsuits filed by anyone for Minor's bodily injury (including, but not limited to, illness, accidents, kidnapping, and detention), property damage, or death, which is alleged to have resulted from Minor's participation in the Event. It is the intention of the parties hereto that I will protect the Released Parties from any liability for bodily injury (including, but not limited

to, illness, accidents, kidnapping, and detention), property damage, or death, as a consequence for Minor's participation in the Event, whether or not the bodily injury (including, but not limited to, illness, accidents, kidnapping, and detention), property damage, or death, is caused by acts or omissions of Released Parties or any third party (including others who may be participating in the Event, or events of any nature that occur during the Event.

- By my (our) signature below, I hereby assume full responsibility for any risk of bodily injury (including, but not limited to illness, accidents, kidnapping, and detention), property damage, or death to Minor due to ordinary negligence or Released Parties and the ordinary negligence, gross negligence, or willful misconduct of any third party, including others participating in the event.

PHOTOS/VIDEOS

- I understand that photos and videos of my child may be taken for use in GCA publications that may be accomplished via the internet, and that afterwards GCA will be unable to prevent persons from gaining access to the internet, copying the photographs and video therefrom, and subsequently using,

altering or republishing them without my consent.

- I waive any claim of damages against GCA from unconsented-to use, alteration or republication of the aforementioned photographs and video by third parties accessing the internet.

CONSENT TO MEDICAL/DENTAL TREATMENT

- I do hereby give permission and consent to the medical or dental personnel selected by the agents or officials of Grace Covenant Academy to administer x-rays, routine tests and treatment to this student.
- I understand that, in the event of an emergency, an attempt will be made to contact me at the phone numbers listed above.
- In the event I cannot be reached in an emergency, I hereby give permission to the medical or dental personnel selected by GCA to hospitalize, secure proper treatment for, and to order injections and/or anesthesia and/or surgery for the student named above.
- I also understand that I will be held financially responsible for all medical and transportation expenses incurred by or related to the incident.

Signature of parent/guardian: _____ Date: _____

