



YOUTH WAIVER OF LIABILITY FOR REFUGE YOUTH NETWORK

**THIS FORM MUST BE COMPLETED BY A LEGAL PARENT OR GUARDIAN
(ALL MINORS MUST HAVE THIS WAIVER SIGNED BY A LEGAL PARENT OR GUARDIAN)**

I, THE LEGAL PARENT OR GUARDIAN OF THE UNDERSIGNED MINOR VOLUNTEER, UNDERSTAND, ACKNOWLEDGE, AND AGREE THAT IN CONSIDERATION OF BEING ALLOWED TO PARTICIPATE IN VOLUNTEER PROGRAM FOR THE DURATION OF ONE YEAR.

NAME OF STUDENT: _____ **SEX AT BIRTH:** _____ **AGE:** _____

SCHOOL STUDENT ATTENDS: _____ **GRADE:** _____

NAME OF GUARDIAN: _____ **PHONE #:** _____

ADDRESS: _____

NAME OF GUARDIAN 2: _____ **PHONE #:** _____

ADDRESS: _____

EMERGENCY CONTACT: _____ **PHONE #:** _____
(NOT GUARDIAN)

STUDENT'S ALLERGIES: _____

MEDICAL CONDITIONS: _____

IS REFUGE AUTHORIZED TO APPROVE MEDICAL TREATMENT? YES: _____ NO: _____

IS STUDENT COVERED BY PERSONAL/FAMILY INSURANCE? YES: _____ NO: _____

IF YES NAME OF INSURER: _____

POLICY OR GROUP NUMBER: _____



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1. I WAIVE ANY AND ALL CLAIMS FOR INJURY OR DAMAGE AGAINST REFUGE YOUTH NETWORK, THEIR STAFF, VOLUNTEERS AND PARTNERED CHURCHES, WHICH MAY THE MINOR INCUR WHILE PARTICIPATING IN THIS PROGRAM.

2. I ASSUME THE RISK FOR ANY AND ALL INJURIES OR DAMAGE, WHICH THE MINOR MAY INCUR WHILE PARTICIPATING IN ACTIVITIES SPONSORED BY REFUGE YOUTH NETWORK

3. I AM FULLY RESPONSIBLE FOR ANY DAMAGE OR INJURY WHICH THE MINOR MAY CAUSE TO PRIVATE PROPERTY OR TO OTHER PERSONS, INTENTIONALLY OR NEGLIGENTLY, WHILE PARTICIPATING IN THIS PROGRAM, AND AGREE TO INDEMNIFY REFUGE YOUTH NETWORK, THEIR STAFF, VOLUNTEERS AND PARTNERED CHURCHES AND THE SPONSOR OF THIS PROJECT, FOR ANY EXPENSES OR COSTS CAUSED BY MY ACTIONS.

4. I WAIVE ANY AND ALL CLAIMS FOR WORKERS' COMPENSATION COVERAGE, AND INDEMNIFICATION AND DEFENSE FOR TORT LIABILITY, AGAINST REFUGE YOUTH NETWORK, THEIR STAFF, VOLUNTEERS AND PARTNERED CHURCHES WHICH THE MINOR MAY HAVE AS A RESULT OF PARTICIPATING IN THIS PROGRAM.

5. I GRANT PERMISSION FOR REFUGE YOUTH NETWORK, AND SPONSORING ORGANIZATIONS, TO USE ANY PHOTOGRAPHS, FILM, AND VIDEOS OF THE MINOR FOR PROMOTIONAL OR OTHER USES EITHER ASSOCIATED WITH THE PROJECT OR SPONSORING ORGANIZATIONS, INCLUDING USE ON WEBSITES AND SOCIAL MEDIA

I HEREBY ADHERE TO THESE STATEMENTS:

GUARDIAN (PRINT NAME): _____

SIGNATURE: _____

DATE: _____

**UPON COMPLETING THIS FORM, SAVE IT AS A PDF AND
EMAIL IT TO OFFICE@REFUGEYOUTHNETWORK.ORG**