



Event and Activity Permission/Liability Waiver and Release

Waiver Valid Until: Rescinded in writing (CTCM keeps on file for future events)

Date certain (insert): _____

In consideration of CrossTies Christian Ministries, Inc. (hereinafter referred to as CTCM), furnishing services, premises and/or equipment to enable me to voluntarily participate in any activity or event sponsored in full or in part by CTCM, including but not limited to such extreme sports activities as paintball, inline skating, skateboarding, BMX biking and wall climbing, and all other activities, I agree as follows:

I fully understand and acknowledge that (a) risks and dangers exist in my use of any and all equipment and my participation in any and all activities; (b) my participation in such activities and/or use of such equipment may result in my injury or illness including but not limited to bodily injury including broken bones, disease strains, fractures, partial and/or total paralysis, eye injury, blindness, heat stroke, heart attack, death or other ailments that could cause serious disability; (c) these risks and dangers may be caused by the negligence of the board of directors, board of advisors, employees, officers, volunteers, agents or lessors of CTCM, the negligence of the participants, the negligence of others, accidents, breaches of contract, the forces of nature or other causes, and such risks and dangers may arise from foreseeable or unforeseeable causes; and (d) by my participation in these activities and/or use of equipment and/or premises, I hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or in part by the negligence or other conduct of the board of directors, board of advisors, employees, officers, volunteers, agents or lessors of CTCM, or by any other person.

I hereby irrevocably grant to CTCM perpetually, exclusively, and for all media throughout the world (including print, non- theatrical, home video, digital or analog media, internet and any other electronic medium presently in existence or invented in the future), the right to use and incorporate (alone or together with other materials), in whole or in part, photographs or video footage taken of me as a result of participation in any and all activities sponsored in part or in full by CTCM.

I, on behalf of myself, my personal representatives and my heirs, hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify CTCM and its board of directors, board of advisors, employees, officers, volunteers, agents and lessors from any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services, or which otherwise may arise out of my use of any and all equipment or premises, or my participation in any and all activities. I understand that I am releasing, discharging and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by the board of directors, board of advisors, employees, officers, volunteers, agents or lessors of CTCM. Unless otherwise noted above, this waiver is valid until rescinded in writing and delivered by US Postal Service to 9876 E. 2000th Avenue, West York, IL, 62478.

I have read the above Event and Activity Permission/Liability Waiver and Release, and by accepting the foregoing consideration and signing it, agree as a participant or as a parent or guardian that it is my intention to exempt and relieve CTCM from all liability for any personal injury, property damage or wrongful death caused by negligence or any other cause. If I am under the age of 18 years of age, I represent and certify that I have gained the permission of my parents and/or guardians as represented below, and that he or she has full knowledge of my participating in any and all activities sponsored in full or in part by CTCM.

Signature: _____

Date: _____

Printed Name: _____

Emergency Phone: _____

Pertinent Medical Information: _____

If participant is under age 18: I am the parent/guardian of this minor and agree to the terms of the above Event and Activity Permission/Liability Waiver and Release.

Parent/Guardian: _____

Date: _____



COVID-19 SYMPTOM-FREE PRE-CERTIFICATION

Player Name: _____

I certify the above-named player is free of COVID-19 symptoms and does not have a temperature of 100 degrees Fahrenheit or higher.

Please check:

- No temperature of 100 degrees Fahrenheit or higher.**
- Free of COVID-19 symptoms (chills; cough; muscle or body aches; sore throat; congestion or runny nose; fatigue; headache; shortness of breath or difficulty breathing; new loss of taste or smell; diarrhea, nausea or vomiting)**

Player/Parent Signature: _____

Date: _____