

# Release and Waiver of Liability Form for Adults

## Los Altos Grace Church

I, the undersigned and my spouse and dependents, will be participating in \_\_\_\_\_  
\_\_\_\_\_ (hereafter the "activity") with **Los Altos  
Grace Church** on or about \_\_\_\_\_ to \_\_\_\_\_, 20\_\_\_\_.

I recognize that there are risks involved in participating in this activity and hereby assume all risk of injury, harm, damage, or death in connection with my/our participation in this activity. I understand and agree that neither **Los Altos Grace Church** nor its trustees, officers, directors, employees, agents or representatives may be held liable in any way for any injury, harm, damage, or death that may occur to me or my dependents as a result of my/our participation in this activity and hereby release **Los Altos Grace Church** its trustees, officers, directors, employees, agents and representatives from any injury, harm, damage or death, which may occur while I/we are participating in the activity. To the fullest extent permitted by law, I agree to release all liability and hold harmless **Los Altos Grace Church** its trustees, officers, directors, employees, agents and representatives from any claim by myself, my estate, heirs, successors, assigns or other persons arising out of my/our participation in the activity.

I authorize **Los Altos Grace Church** through its trustees, officers, directors, employees, agents or representatives to render or obtain such emergency medical care or treatment for me, my spouse, and my dependents as may be necessary should any injury, harm or accident occur to me while participating in this activity.

### IF APPLICABLE:

I understand and acknowledge that **Los Altos Grace Church** does not provide health or medical insurance in connection with the activity and I agree that I will be financially responsible for any bills incurred as a result of medical treatment, including emergency medical treatment and/or transportation to a medical facility, in connection with my/our participation in the activity.

Spouse & Dependents also attending trip:

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Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_