



Trip/Event Application Form

Trip Name: _____ Date of Trip: _____

Full Legal Name: _____ Preferred Name: _____

Mailing Address: _____

City/State/Zip: _____

Home Phone: _____ Work Phone: _____ Cell: _____

Email Address: _____ Age: _____

In Case of Emergency please notify: _____ Relationship: _____

Address: _____ Phone: _____

Medical Information

1. List any major accidents, illnesses or operations you have had in the past five years.
2. List any/all physical/mental limitations or medical conditions that may restrict your ability to participate on this trip.
3. List any/all medications you will be taking on this trip and why:
4. List any/ all allergies to food and/or medication:
5. List insurance name and policy number:
6. Phone number of Insurance Company:
7. List Physician name and phone number:
8. Are you familiar with standard first-aid and current CPR Techniques? Yes _____ No _____

Participant Agreement, Release, and Assumption of Risk

1. In consideration of the right to participate in the trip, with Bethany Community Church, their agents, volunteers, participants, employees and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as "Bethany"), I hereby agree to release indemnify, and discharge Bethany, on behalf of myself, my spouse, my children, my parents, my heirs, assigns, personal representative and estate as follows.
2. I understand that participating in the Wilderness Ministry trip sponsored by Bethany entails known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.
The risks include, amongst other things: the hazards of walking on uneven terrain and slips and falls; unpredictability of weather, forces of nature; the risks of exposure to insect bites; the risk of cold including hypothermia; the use of climbing ropes and equipment; my own physical condition; physical exertion associated with this activity; travel by van; and automobile.
3. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation on this activity is purely voluntary, and I elect to participate in spite of the risks.
4. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Bethany from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of Bethany's equipment, facilities, or transportation. Including any such claims which allege negligent acts or omissions of Bethany
5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.
6. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By signing this document, I acknowledge that if any is hurt or property is damaged during my participation in this activity, I may be found by court of law to have waived my right to maintain lawsuit against Bethany on the basis of any claim from which I have released them herein. I have had sufficient opportunity to read this entire document. I have read and understood it, and agree to be bound by its terms.

Signature of Participant: _____ Print Name: _____ Date: _____