

Johns Creek Baptist Church
RELEASE, INFORMED CONSENT & WAIVER AGREEMENT FOR
SPORTS PARTICIPANTS, FITNESS PARTICIPANTS AND GUESTS

FOR YOUR HEALTH

- I understand I am engaging voluntarily in exercise, physical activity and/or recreational programs.
- It is my responsibility to monitor my own condition throughout any activity or program and, should any unusual symptoms occur, I will cease my participation and inform the instructor/coach and staff of the symptoms.
- In the event that a medical clearance must be obtained prior to my participation in a physical activity program, I agree to consult my physician and obtain written permission from my physician prior to the commencement of any program. I agree to assume the natural risks associated with exercise, sports and physical activity.

REGARDING YOUR CONDUCT

- I will not bring weapons, controlled substances or alcohol onto Johns Creek Baptist church premises or any location being used by programs conducted by or with Johns Creek Baptist church.
- I understand that use of violence, noise, force, coercion, threats, intimidation, unsafe conduct regarding children, fear, resistance, insults, or other conduct, intentionally or unintentionally causing disruption or preventing participants ability to enjoy their experience or staff's and/or volunteer's ability to conduct a program or their job duties, is not acceptable behavior, is in conflict with Johns Creek Baptist Church values, and may result in termination from the program and future programs.

YOUR CONSENT AND RELEASE

- I HEREBY AGREE TO RELEASE AND HOLD HARMLESS Johns Creek Baptist Church, its employees and volunteers, from any loss, liability, claim of bodily injury or property damage, or costs which may arise due to my use of the facilities or any facilities where programs are conducted and equipment and my participation in programs. This agreement shall be governed by the laws of Georgia.
- I authorize the use and reproduction of any and all photographs or video footage for Johns Creek Baptist Church promotional purposes.
- By signing this form, I agree that I have read this entire form and understand my responsibilities for participation and conduct in Johns Creek Baptist Church programs and activities.

Signature

Name (Please Print)

Date

Spouse

Name(s) of Child/Children

Parent/Guardian

Emergency Contact Information

In case of emergency, please contact:

Name

Relationship

Phone

Cell Phone

Name

Relationship

Phone

Cell Phone