Minor Consent Liability & Waiver Release Form

I,, am the parent or legal guardian of	("the Minor") who
will be participating in a short-term mission trip to Guatemala (her	reinafter collectively
referred to as the "program").	
I hereby acknowledge and agree on behalf of the Minor to the pro-	visions of this Consent
Liability & Waiver Release Form as follows:	

I. PARTICIPANTS VOLUNTARY PARTICIPATION

The Minor wishes to participate and acknowledges that his or her participation is completely voluntary.

II. PARTICIPANT'S ASSUMPTION OF RISK

Guatemala has health and safety standards substantially below those enjoyed in the United States. The Minor is voluntarily participating in the Program and assuming all risk of illness, injury, kidnapping, being held hostage, death, etc. from his or her participation therein.

Participant acknowledges as follows:

- The Minor is solely responsible for his or her safety at all times relevant to the Program, including, without limitation, travel to and from Guatemala, and at all times while in in Guatemala, including during personal travel.
- O The minor understands and acknowledges that More Than Compassion only provides health or medical insurance in connection with the program upon request and for an additional fee. All participants are encouraged to take advantage of this option. The Minor understands it is his or her decision to purchase medical insurance for this trip and as such, participant will accepts financially responsibility for any bills incurred as a result of medical treatment, including emergency medical treatment and/or transportation to a medical facility, in connection with his or her participation in the program.
- The Minor is responsible for taking every precaution to safeguard his or her health, including but not limited to avoiding the consumption of non-bottled water and food from roadside vendors.
- o The Minor agrees to protect personal belongings from damage or theft.
- The Minor has been advised of the risks inherent in travel to and residence in the country where the Program is conducted and, in spite of these potential risks, the minor has knowingly and voluntarily made the decision to participate in the Program and to travel to the country where the Program is conducted.
- The Minor is mentally and physically fit, capable, able and willing to participate in the Program.

III. RELEASE

The Minor acknowledges that there are certain inherent risks of injury to his or herself or damage to personal property respecting his or her participation as a participant (including

but not limited to illness, injury, acts of terrorism, death, robbloss or destruction of life and property). Therefore, the minor agrees for his or herself, and his or her family, heirs and exec Compassion, The School of Hope, Fundación Salvación, and church here) and their officers, employees, agents, staff perso be held liable or responsible for any injury to his or her perso damage to personal property or any consequential damage art from his or her participation. To the maximum extent permitt releases and indemnifies More Than Compassion, The School Salvación, and (insert church here) and the agents, staff personnel and assigns from and against any presoliability for injury, including fatal injury or damage to proper suffer, or for which the Minor may be liable to any other person participation. Further, the Minor knowingly and intentionally for his or herself, and his or her family, heirs and executors to Than Compassion, The School of Hope, Fundación Salvación (insert church here) and their officers, employees, agents, station and injury to his or her person, or for illness, loss or damage to consequential damage arising or in any way resulting from his than for a claim against one or more of such parties arising from Such party.	knowingly and intentionally autors that for More Than (insert onnel and assigns shall not on, or for illness, loss or ising or in any way resulting ted by law, the minor of of Hope, Fundación ir officers, employees, ent or future claim, loss or ty which the Minor may son, during his or her y waives any and all rights to bring suit against More in, and ff personnel and assigns for to personal property or any is or her participation, other
IV. MEDICAL EMERGENCY AUTHORIZATION I, on behalf of the Minor, authorize More Than Compassion to employees, directors, or representatives to authorize and obtator treatment for the Minor as may be necessary should any in to me while participating in the program.	in emergency medical care
V. PHOTOGRAPHY RELEASE I,, on behalf of the Minor, give More Than Compassion rights to use of any photographs, video clips, audio recordings, or any other visual or audio reproduction that may be taken during my participation in the mission trip. The display and future use of this media extends to but is not limited to: MTC website, blog, social media sites, print media, fundraising and display at events.	
V. KNOWING AND VOLUNTARY EXECUTION I have carefully read this consent and release and fully understand its contents. I am aware that this is a release of liability and a contract between myself and releasees and/or affiliated organizations and sign this of my own free will.	
(Parent or legal guardian signature)	(Date)