Release Form

(Release, Hold Harmless, and Authorization of Medical Care)

NO REGISTRANT WILL BE ADMITTED TO LIFE 2010 WITHOUT COMPLETING AND SIGNING THE FOLLOWING.

I realize that my participation in the LIFE 2010 Conference in Louisville, KY July 6, 2010 through July 10, 2010, is voluntary. Understanding this, I (on behalf of my family, and any others who might make a claim on my behalf) expressly assume any and all risks of property damage, injury, and/or death arising from my participation in the Conference. I knowingly release The Christian and Missionary Alliance (C&MA), Worship and the Word Movement, and Edge Outreach, members of their Boards of Directors, their officers, employees, members, volunteers, and agents (collectively, the "Released Parties"), from any and all claims, losses, damages, and liabilities (whether known or unknown or unforeseen) related to my participation in the Conference.

I further agree to indemnify and defend the Released Parties from any and all claims, losses, damages, and liabilities related to any and all property damage, personal injury and/or death arising from my participation in the Conference, as may be asserted by a third party (defined as any party other than the Released Parties or me). In case I am in need of medical or surgical treatment to protect my health and welfare while participating in the Conference, I authorize and agree to allow any authorized agent or employee of the C&MA to consent to and authorize the administering of such necessary medical and/or surgical treatment.

I agree that this Agreement shall be governed by and interpreted in accordance with the laws of the State of Colorado and the parties hereby agree to the exclusive jurisdiction of the Colorado courts. The terms of this Release are contractual and not a mere recital.

Date: _____/_____/_____ Signature: _____

(Student)

Print Name: _____

For Participants Under the Age of Eighteen:

I represent that I am the parent/legal guardian of _____, who is under the age of eighteen (18) or otherwise a minor in his or her state of residence. In consideration for allowing the participation of my child/ward in LIFE 2010 Conference, I hereby agree to be bound by the terms of the above Release, Hold Harmless, and Authorization of Medical Care.

Date: _____/_____/_____ Signature: _____

(Parent)

Print Name: _____

NOTE:
It is the responsibility of the Group leader to have **one completed Release Form** per registrant with him/her at the LIFE 2010 Conference.