

WPMF Trip Permission Form

Name of Child _____

Destination: _____

Date of trip _____ Time of departure _____ Time of return _____

How will the group be traveling?

___ public transportation ___ private auto other _____

Driver(s) _____

Check any hazardous activities in which participants may expect to engage during this trip.

___ swimming ___ boating ___ camping/hiking ___ cycling
___ climbing/rope courses ___ skiing ___ airplane flights other _____

Release of Liability

By signing this Permission/Waiver Form, I expressly warrant that the child named above or I, if I am a participant, am capable of withstanding both the physical and mental demands of the activities discussed above. I also expressly assume all risks of the child or me participating in the activities, whether such risks are known or unknown to me at this time. I further release WEST PHILADELPHIA MENNONITE FELLOWSHIP and its ministers, leaders, employees, volunteers, and agents from any claim that my child may have or that I may have against them as a result of injury or illness incurred during the course of participation in the activities. This release of liability shall include (without limitation) any claims of negligence or breach of warranty. This release of liability is also intended to cover all claims that members of the child's or my family or estate, heirs, representatives, or assigns may have against WEST PHILADELPHIA MENNONITE FELLOWSHIP or its ministers, leaders, employees, volunteers, or agents.

I further agree to indemnify and hold harmless WEST PHILADELPHIA MENNONITE FELLOWSHIP and its ministers, leaders, employees, volunteers, or agents from any and all claims arising from my participation in its activities and programs, or as a result of injury or illness of my child during such activities.

I represent that I am the parent/guardian of _____, who is under 18 years of age. I give permission for the child named above to participate in the special event/activity described above. In consideration for allowing the participation of this child in the activities of WEST PHILADELPHIA MENNONITE FELLOWSHIP I hereby consent to the Release of Liability above, on behalf of the child, and agree that this Trip Permission Form shall be binding upon me, my family, heirs, legal representatives, successors, and assigns.

Signature of Parent or Legal Guardian (or participant, if over 18 years of age)

_____ Date _____

Print Name _____

Phone number where parent can be reached _____