

WAY M-RETREAT WAIVER

I / My child _____ (adult participant, parent, legal guardian) acknowledge, that in participation of **Christian Governance’s Worldview & Apologetics Young Men’s Retreat, held at Bethesda Renewal Centre**, there may be some risk of physical injury due to the nature of activities at **WAY-M Retreat**.

I / My Child acknowledge that by participating in volunteer activities such as wood splitting, I am at risk for potential injury.

I / My Child acknowledge that by participating in sporting and martial arts activities I am at risk of physical injury.

In consideration for acceptance of these activities, I do hereby release and forever discharge, for myself any and all claims to collect damages which **my child** may incur in these activities, and any and all rights to such damages against **Christian Governance** and **Bethesda Renewal Centre**, their representatives, employees, independent contractors, agents or officials, directors, sponsors, or any officials of these programs.

This includes any transportation involved with travel related to these programs.

I further represent that **I/my child am / is** in good physical condition to participate in these programs.

EMERGENCY MEDICAL AUTHORIZATION- PART 1 OR PART 2 MUST BE COMPLETED

PART 1 [To grant consent]

I hereby give my consent for the administration of any treatment deemed necessary by a licensed physician or dentist; and the transfer of my **child/myself** to any reasonably accessible hospital. **This authorization does not cover major surgery unless the medical opinions of two licensed physicians or dentists concur on the need for such a surgery and are obtained prior to the performance of such surgery.**

Signature of Legal Guardian/Adult Participant _____

Date ____/____/____

PART 2 (REFUSE TO GRANT CONSENT)

(DO NOT COMPLETE PART 2 IF YOU COMPLETED PART 1 ABOVE) – I DO NOT give my consent for emergency medical treatment of my child/myself.

Signature of Legal Guardian/Adult Participant _____

Date ____/____/____