



## **2011/2012 Indemnification Agreement, Medical Treatment & Photographic Release**

We(I), being 21 years or older, on behalf of our(my) minor child \_\_\_\_\_ (Minor's name) do hereby agree to hold harmless from, indemnify, and defend against, including the payment of attorney's fees, Christ United Methodist Church, its trustees, ministers, officers, staff, and volunteers, including volunteers pertaining to any and all trips or activities, any and all claims, liability, allegations of personal injury, sickness, or death, as well as property damages and expenses, of any nature whatsoever that may be incurred by the undersigned and or child participant that may occur while said child is participating in any and all Christ United Methodist Church's trips or activities during the 2011/2012 school year and following summer.

Furthermore, we on behalf of said child assume all risk of personal injury, sickness, death, damage and expense as a result of participation in the recreation activities involved herein.

I hereby authorize the Christ United Methodist Church Staff and/or Volunteers to obtain and consent to medical treatment for my child in case of injury or illness during any and all Christ United Methodist Church's trips or activities.

I hereby grant to Christ United Methodist Church and to its employees, agents and assigns the right to photograph my minor child and use the photo and or other digital reproduction of him/her or other reproduction of his/her physical likeness for publication processes, whether electronic, print, digital or electronic publishing via the Internet.

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Signature of Parent, Guardian

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Name of Parent, Guardian (printed)

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Date



Christ-Youth  
Student Ministries

Christ United Methodist Church  
211 Phillip Morris Dr.  
Salisbury, MD 21804  
410-742-5334

Address Service Requested

**Medical Packet &  
Assateague  
Registration Form**