



100 Post Oak Road, Madison, MS 39110 · Phone (601) 856-6058 · Fax (601) 856-6061

## Activity Participation Agreement

### Activity Information

**Name of sponsoring organization:** Madison United Methodist Church

**Address:** 100 Post Oak Road, Madison, MS 39110

**Telephone:** 601-856-6058

**Name of sponsor's coordinator:** Cory Phillips

**Description of Activity:** \_\_\_\_\_

**Date (s) and location of activity:** \_\_\_\_\_

### Participant Information

(To be completed by participant or authorized guardian)

Name of participant: \_\_\_\_\_ T-Shirt size \_\_\_\_\_ Grade \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name of emergency contact: \_\_\_\_\_

Telephone (daytime): \_\_\_\_\_ Telephone (evening): \_\_\_\_\_

Email \_\_\_\_\_

Is sponsor authorized to approve medical treatment?      \_\_\_ Yes    \_\_\_ No

Is participant covered by personal/family medical insurance:      \_\_\_ Yes    \_\_\_ No

If yes, name of insurer: \_\_\_\_\_

Policy or group number: \_\_\_\_\_

### Participation Agreement

In consideration for the opportunity to participate in the above activity, the Participant (or parent/guardian if Participant is a minor) acknowledges and accepts the risks of injury associated with participation and transportation to and from the activity. The Participant (or parent/guardian) accepts personal financial responsibility for any injury sustained during the activity or during transportation to and from the activity. Further, the Participant (or parent/guardian) promises to indemnify, defend, and hold harmless the activity sponsor or its agents, employees, volunteers, or any other representatives (collectively referred to hereinafter as the "Sponsor") for any injury related directly or indirectly out of the described activity or transportation to and from the activity, whether such injury arises out of the negligence of the Sponsor or otherwise.

If a dispute over this agreement or any claim for damages arises, the Participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable alternative dispute resolution process. If the Participant (or parent/guardian) and the Sponsor cannot agree upon such a process, the dispute will be submitted to a three-member arbitration panel of the American Arbitration Association for final resolution.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Participant or parent/guardian if participant is a minor)