

RELEASE, WAIVER OF LIABILITY, AND INDEMNIFICATION AGREEMENT FOR PARTICIPANT/DEPENDENT

Alaska Statute 09.65.145 addresses liability for injuries or death resulting from activities involving horses and other livestock. Please read the attached statute.

This statute states that a person may agree, in writing, to waive the entire right to recover damages resulting from an inherent risk of an activity involving horses. See AS 09.65.145(g). By signing this RELEASE, WAIVER OF LIABILITY, AND INDEMNIFICATION AGREEMENT, you are waiving, for you and any dependent, any and all rights to recover damages that result from participation in any livestock activity at Victory Ministries of Alaska.

1. On behalf of myself, dependents, minor child(ren), assigns, executors, and heirs, I hereby do promise to forever release, discharge, and hold harmless Victory Ministries, including Victory Bible Camps and Camp Li-Wa (collectively, "Victory Ministries"), and its agents, officers, directors, trustees, owners, employees, camp staff, volunteers, and other individuals associated with Victory Ministries from any demand, cause of action, or any type of claim whatsoever that is in any way connected with my participation, and/or my minor child's participation, in any Victory Ministries camp, function, or activity ("Victory Ministries Activities") and my use, and/or my minor child's use, of Victory Ministries' facilities and equipment.
2. I hereby represent and agree that my participation and/or my minor child's participation in Victory Ministries Activities is entirely voluntarily. I am aware of the inherent and extreme dangers of outdoor activities and activities involving horses and other livestock. I am aware that serious bodily injury or even death can result from the inherent dangers of these activities. I expressly agree and promise to accept and assume any and all risks associated with Victory Ministries Activities. My participation and/or my minor child's participation in Victory Ministries activities is voluntary despite these serious risks.
3. I have read Alaska Statute 09.65.145 and hereby expressly agree to waive my entire right, and my minor child's entire right, to recover damages resulting from an inherent risk of a livestock activity.
4. I certify and represent (a) that neither I nor my dependent has any medical or physical condition that could interfere in any way with my or my minor child's health or safety in connection with any Victory Ministries' activities, or (b) that I am accepting and assuming any and all risks and costs, and promise to indemnify and hold harmless Victory Ministries for any and all damages, caused or created directly or indirectly by any such medical or physical condition.

5. I consent to all emergency medical treatment for myself and/or my minor child that may be needed in connection with participation in Victory Ministries Activities. I agree that all expenses incurred in rendering medical services, including transportation for medical treatment, will be a debt and liability I am solely responsible for and I agree to make any repayment, time being of the essence. I have the following health insurance:

_____ (insurance name) _____ (group number)
_____ (member name) _____ (insurance phone number).

6. I agree to indemnify and hold harmless Victory Ministries of Alaska for any and all legal fees that Victory Ministries may incur in connection with any enforcement of this Release, Waiver of Liability, and Indemnification Agreement.

7. I have read and understand all of the terms of this **RELEASE, WAIVER OF LIABILITY, AND INDEMNIFICATION AGREEMENT** and unconditionally agree to all of its terms and conditions on behalf of myself, dependents, heirs, representatives, executors or administrators. If signing this document on behalf of a minor child, I certify and represent that I have legal custody of the minor child and have full legal authority to sign this **RELEASE, WAIVER OF LIABILITY, AND INDEMNIFICATION AGREEMENT** on the minor child's behalf.

PRINTED NAME OF MINOR CHILD

DATE OF BIRTH OF MINOR CHILD

*******READ AND UNDERSTAND BEFORE SIGNING*******

SIGNATURE

DATE

PRINTED NAME

AK DRIVER'S LICENSE NUMBER

PHYSICAL ADDRESS

CITY

STATE

ZIP

MAILING ADDRESS

CITY

STATE

ZIP

HOME PHONE

EMERGENCY PHONE