

JOURNEY MINISTRIES – A ministry of First Baptist Church of Santa Barbara, CA  
949 Veronica Springs Rd. Santa Barbara, CA 93105  
(805) 682-2485



Yes, I want to sign-up for Journey Newsletters and notifications of events! Email: \_\_\_\_\_

**Parental Consent and Release of Liability**  
**Please Print and Provide All Information Requested**

IMPORTANT: THIS DOCUMENT CONTAINS A RELEASE OF LIABILITY.  
YOU ARE ADVISED TO REVIEW IT CAREFULLY.

Name of Participant \_\_\_\_\_

Emergency Contact Phone #1 \_\_\_\_\_ #2 \_\_\_\_\_

Birthday \_\_\_\_\_ Address \_\_\_\_\_

I understand and agree that participation in a **Journey Ministries** or **First Baptist Church** event is a privilege to which my minor child named above is not otherwise entitled. In consideration of that privilege, I am signing this Parental Consent and Release of Liability.

**Consent to Attend Events**

I hereby give permission for my Child to attend and participate in the **Journey** and **First Baptist Church** events.

**Release of Liability**

Prior to my Child's involvement in the Event activities, I acknowledge that involvement of my Child in the Event may involve risk of property damage and of personal injury, illness or even death, including but not limited to the risks arising from transportation-related activities, recreational activities, adventure sport activities (surfing, rock climbing, caving, mountain biking, hiking, and canyoneering), accidents in and around facilities, adverse weather conditions, and injuries and illness as a result of food-borne illnesses and allergic reactions.

By signing this Parental Consent and Release of Liability, I state that my Child is fully capable of safely participating in all Event activities, and I expressly assume all risks of my Child's involvement, whether such risks are known or unknown to me at this time. I further generally release **Journey Ministries** and **First Baptist Church**, its directors, officers, employees, volunteers, and agents, and other participants at the Event, from any and all claims that I or my Child may have against any of them, whether on or off Event grounds. This Release of Liability is given on behalf of myself, my Child, and any heirs, family, estate, administrators, and personal representatives of me and my Child.

< - - CAUTION - - OUTDOOR RECREATION HAS SERIOUS INHERENT RISKS! PARTICIPATE AT OWN RISK! - - >

I expressly agree that this Release is intended to be as broad and inclusive as permitted by the State of California.

**Consent to Medical Treatment**

I hereby give my consent that my Child may receive medical treatment that may be deemed advisable in the event of injury, accident and/or illness during this event.

List any medical or food allergies of Participant (please write "None" if applicable):

Will Participant be under any medication while at Event? Yes \_\_\_ No \_\_\_ If yes, please provide details:

**Media Release**

I understand that at this event or related activities, my Child may be photographed and/or video recorded. I agree to allow my Child's photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and assigns.

**Authority to Sign**

I have read the above release waiver and by signing it I agree that it is my intention to exempt and relieve **Journey Ministries** and **First Baptist Church** from liability for personal injury, property damage or wrongful death caused by negligence or other cause. I represent and warrant that I am a parent or legal guardian of the Child named above, and have the full power and authority to enter into this Parental Consent and Release of Liability on behalf of the Child. By signing below, I acknowledge that I have read and understand this document, and also represent that all information provided is accurate.

I agree that this Release shall be governed by and interpreted in accordance with the laws of the State of California. Any litigation under this agreement shall be resolved in the courts of Santa Barbara County, California.

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_