



Mission Trip Participants - Release and Waiver of Liability Form for Short Term Trip

I, *the* undersigned, will be participating in a short-term mission trip, sponsored, organized, and operated by **<Enter Sponsoring Church/Sponsoring Nonprofit entity>** _____, to Guatemala (hereafter the "mission trip") on or about _____, 20____ to _____, 20____.

I recognize that there are risks involved in participating in the mission trip and hereby assume all risk of injury, harm, damage, or death in connection with my participation in it. **I am not subject to any medical restrictions or conditions regarding my participation in the mission trip.** I understand and agree that neither **my sponsoring church/501(c)(3), Medical Missions Ministries, Hermann Alb and his employees/agents/representatives, Asociación Transformación Integral ("ATI"), Mana de Vida School, Vida Real Church, nor the trustees, officers, directors, employees, agents, volunteers, team leaders, team co-leaders or representatives of each of the foregoing (all of which, collectively and separately, are hereafter referred to as "organizations" throughout this document)** may be held liable in any way for any injury, harm, damage, or death that may occur to me as a result of my participation in this mission trip. I hereby release these **organizations** from any injury, harm, damage or death which may occur while I am participating in the mission trip. To the fullest extent permitted by law, I agree to save and hold harmless these **organizations** from any claim by myself, my estate, heirs, successors, assigns or other persons arising out of my participation in the mission trip.

I authorize these **organizations** through their trustees, officers, directors, employees, agents or representatives to render or obtain such emergency medical care or treatment for me as may be necessary should any injury, harm or accident occur to me while participating in the mission trip.

I understand and acknowledge that this release is a private contract entered into in **<Enter the state that the sponsoring church/sponsoring nonprofit is located in the next two blanks>** _____ and that it will be covered by _____ law, regardless of where any occurrence covered by this release takes place.

Executed this _____ day of _____, 20____.

Signature _____

Print Name _____

Witness: _____

Print Name of Witness: _____