



Jungle Kids for Christ Inc.

In alliance with Kaleo Kids and Little Steps of Faith

“Empowering children for God’s glory”

MEDICAL RELEASE & LIABILITY FORM

I, _____, will be serving as a missionary for Jungle Kids for Christ, Inc., and acknowledge the fact that I am physically able to participate in the related events/activities. I hereby authorize Jungle Kids for Christ, Inc. to act for me according to their best judgment in any emergency requiring medical attention. I acknowledge that I will be responsible for any cost (through medical insurance or otherwise) incurred due to sickness or injury to me. I hereby waive any claim and forever discharge Jungle Kids for Christ Inc., its agents, servants, and all other persons, firms and corporations whomsoever of and from any and all actions, claims, and demands which claimant now has or may hereafter have on account of or arising out of any accident, casualty, and/or event which might occur while on or off the premises of Jungle Kids for Christ, Inc.

I am over eighteen years of age, and legally competent to execute this Waiver of Claims.

Signature

Signed this _____ day of _____, 201_

Sworn to and subscribed by me this _____ day of _____, 201_.

(Notary Public)
My Commission Expires:

Note: Do not sign ahead of time: Notary must witness signature.

Personally known to me__ or produced Driver License # _____ as identification.

Emergency Phone #'s

(Name) Telephone Day Telephone Evening Relationship

(Name) Telephone Day Telephone Evening Relationship