

**Family Life Building Waiver and Release**

IN CONSIDERATION of being permitted to participate in activities (including, but not limited to, working out in the cardio and weight rooms and participating in athletic and/or recreational activities) in the First Baptist Church (FBC) Family Life Building (FLB), THE UNDERSIGNED agrees as follows:

- \_\_\_\_\_ Initial      1. HEREBY ACKNOWLEDGES, AGREES, AND REPRESENTS that he or she has read the attached rules of the FLB and does agree to abide by same.
- \_\_\_\_\_ Initial      2. HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS not to sue FBC or any of its staff, volunteers, or members from any and all liability to the undersigned for loss or damage to person or property while on the premises of the FLB, whether caused by the negligence of FBC, any of its staff, volunteers, or members, or otherwise.
- \_\_\_\_\_ Initial      3. HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the FBC or any of its staff, volunteers, or members from any loss, liability, damage or cost they may incur arising out of or related to the event(s), whether caused by the negligence of the FBC or any of its staff, volunteers, or members, or otherwise.
- \_\_\_\_\_ Initial      4. HEREBY ASSUMES FULL RESPONSIBILITY for any risk of bodily injury, death or property damage arising out of or related to the event(s), whether caused by the negligence of the FBC or any of its staff, volunteers, or members, or otherwise.
- \_\_\_\_\_ Initial      5. HEREBY ACKNOWLEDGES that the activities of the event(s) carry with them a certain risk of injury. The undersigned also expressly acknowledges that injuries received may be compounded or increased by negligent operation of equipment on the part of the undersigned.
- \_\_\_\_\_ Initial      6. HEREBY ACKNOWLEDGES that each member is personally and individually responsible for his/her own safety and security as well as the security of his/her personal vehicle(s) and other property while on the church premises.
- \_\_\_\_\_ Initial      7. HEREBY ACKNOWLEDGES that the undersigned is aware that it is his/her responsibility to consult with a licensed physician to ensure that he/she is medically able to participate in any FLB activities and that it is his/her responsibility to do so before participating in said activities.
- \_\_\_\_\_ Initial      8. HEREBY ACKNOWLEDGES that the undersigned is eighteen years of age or older and is legally and mentally competent to execute this document. (Those under eighteen must also obtain the signature of a parent or legal guardian.)

I HAVE READ THE FOREGOING RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS

BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY  
WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE  
TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND  
UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT  
ALLOWED BY LAW.

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

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

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

*For minors under the age of eighteen years:*

Signature of Parent/Legal Guardian: \_\_\_\_\_

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

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