

# Parental Waiver and Release of Liability

Read Carefully!

In consideration of my minor child, \_\_\_\_\_, the "Volunteer", being permitted to participate in the Team Trip, I, \_\_\_\_\_, as parent/legal guardian, acknowledge and agree as follows:

Africa New Life Ministries International and Africa New Life-Rwanda, and the organizations' officers, directors, trustees, administrators, agents and representatives are collectively referred herein as "Africa New Life."

## I. Acknowledgments

Participation in the Team Trip is voluntary. Africa New Life does not make any financial profit from the Team Trip.

I acknowledge that international travel, particularly travel to or near regions experiencing civil war, contains risks which are different from and less predictable than those risks associated with domestic travel. Those risks can include, but are not limited to, exposure to wild animals, unfamiliar or difficult terrain, extreme climate, substandard or remote and not immediately available medical care, uncommon disease and illnesses, including malaria, poor safety and sanitary practices, lack of adequate public infrastructure, political unrest, civil war in nearby regions, terrorism, and unconventional customs and practices.

I have been given ample opportunity to review the Team Trip Guide and Required Reading, including the U.S. Team Trip Policies, the Rwandan Team Trip Policies, and this Waiver and Release of Liability (the "Waiver") and I understand that the Waiver includes, among other things, a waiver and release of my claims and the Volunteer's claims against Africa New Life for personal injuries, damages and/or losses relating to and/or arising out of the Team Trip.

## II. Consent and Assumption of Risk

I acknowledge that volunteering with the Team Trip carries with it certain inherent risks regardless of the care taken to avoid injuries. I agree that any activities that the Volunteer may take part in, whether as a component of the Team Trip or separate from it, will be considered to have been undertaken with my approval and understanding of any and all risks involved.

I have reviewed the Team Trip Guide with the Volunteer and fully understand and assume the risks associated with the Team Trip on behalf of my minor child, including those risks not identified in the Team Trip Guide.

**III. Wavier and Release**

**On behalf of myself and the Volunteer, I hereby waive, release and forever discharge Africa New Life from any and all liability, claims and demands for personal injury, property damage or death arising out of or in any way relating to or resulting from the Team Trip, even though this liability may arise from negligence on the part of Africa New Life.**

**I understand that this Waiver discharges Africa New Life from any liability or claim that I and/or the Volunteer may have with respect to any damages that may arise out of, result from or relate to activities with Africa New Life, whether as a component of the Team Trip or separate from it, including claims for negligence of Africa New Life.**

This waiver does not release Africa New Life from any claims arising from its gross negligence and/or intentional misconduct.

**IV. Severability**

If any provision or term of this Waiver is held invalid or unenforceable, the invalidity shall not affect other provisions of this Waiver.

**V. Governing Law; Venue**

This Waiver shall be construed in accordance with, and governed by, the laws of the State of Oregon. I expressly agree that this Waiver is intended to be as broad and inclusive as permitted by the laws of the State of Oregon. I further agree that the venue for any dispute arising under this Waiver shall be in any Oregon court of competent jurisdiction.

**I have carefully read this Waiver and I understand its contents and consent to its terms. I am aware that this is a WAIVER AND RELEASE OF LIABILITY and a contract between me and Africa New Life regarding the rights of my minor child and I sign of my own free will.**

\_\_\_\_\_  
Parent/Legal Guardian Name (Printed)      Parent/Legal Guardian Signature      Date

Volunteer Name: \_\_\_\_\_ Volunteer's Age: \_\_\_\_\_

Team Name: \_\_\_\_\_ Dates of Travel: \_\_\_\_\_