

This liability waiver must be signed by the parent/guardian of each child who participates in the EI Summer Fun Nights, Tuesday nights, June 10<sup>th</sup> - July 29<sup>th</sup>, 2025. **Any child whose parent/guardian does not sign this form will not be permitted to participate.**

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## ACCIDENT WAIVER AND RELEASE OF LIABILITY

**Participant's Name:** \_\_\_\_\_

**Current Age:** \_\_\_\_\_

(The age requirement for Summer Fun Nights is 13 years and older. **No exceptions.**)

**Emergency Contact:**

Parent/Guardian's Name: \_\_\_\_\_

Parent/Guardian's Phone Number: \_\_\_\_\_

**Parental Permission:**

I, \_\_\_\_\_, give my child, \_\_\_\_\_, permission to participate in all activities during **the Summer Fun Night**. I hereby release, waive and discharge from any economic or non-economic losses, damages, suits, actions, claims, expenses, attorney's fees, any and all liability, including but not limited to, liability arising from the negligence, gross negligence or fault of the Evangelical Institute of Greenville, SC, Inc. its faculty, staff, board members, volunteers and workers (collectively, the "released parties"), for my child's personal injury, disability, sickness, death, and property loss or damage incurred by him / her arising from or related to his / her presence, observance or participation during conference activities or occurring hereafter. I hereby indemnify, hold harmless, and promise not to sue the released parties from any and all liabilities or claims made as a result of participation in conference activities, whether caused by the negligence, gross negligence or strict liability of the released parties or otherwise. I, furthermore, grant the Evangelical Institute of Greenville, SC, Inc. authority to authorize any and all medical treatment necessary for the protection of the health and well-being of my aforementioned child during Summer Fun Nights, Tuesday nights, June 10<sup>th</sup> - July 29<sup>th</sup>, 2025 if I cannot be immediately contacted.

**Signature of parent or guardian or participant if over the age of 18 years old:**

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

**PHOTO USE WAIVER:**

As the participant/guardian of my child, I give the Evangelical Institute of Greenville, SC, Inc. permission to use photos with me/my child in it on the school website, Facebook page, brochures representing the **Summer Fun Nights**, and other published material. I understand that I/my child will not be named or "tagged" by EI in the photo.

Participant's Name: \_\_\_\_\_

Parent/Guardian Signature (or participant if over the age of 18 years old):

\_\_\_\_\_

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