**LIABILITY RELEASE FORM FOR MISSION TRIP**

**WARNING: THIS IS A COMPLETE RELEASE OF POTENTIAL CLAIMS**

**TO BE COMPLETED BY APPLICANT IF 18 OR OLDER OR BY PARENT OR GUARDIAN OF APPLICANT IF APPLICANT IS UNDER 18.**

In consideration of my being accepted by EHPM for participation on a Ministry/Missions team to \_\_\_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_\_\_\_, I make the representations and undertakings set out below:

(Location) (Dates)

I am in good health and have received or will receive all vaccinations recommended by my county or state health department for travel in the countries or areas to be visited on this trip.

I know that International travel involves danger and risk. I acknowledge that the dangers and risks include, but are not limited to, the hazards of travel by air, boat, raft, jeep, automobile, bus, taxi, bicycle, and on foot, travel in foreign countries, in jungles, mountains, high altitudes, steep terrain; travel and/or attendance at meetings among possibly unfriendly persons; sickness or injury in areas where medical assistance may be primitive or inadequate, unavailable or not readily available, and/or where rapid evacuation is not available; or where there is exposure to crime, to civil unrest and to forces of nature or other dangers. I understand that the above and other possibilities are risks in ministry/missions travel.

I know that EHPM does not carry any insurance, and I acknowledge that EHPM has advised me that EHPM does not accept any responsibility for any injury, loss or damage not covered by the above-mentioned insurance. I further acknowledge that EHPM has recommended that I carry or obtain primary medical insurance to cover possible medical needs including evacuation occurring during this trip and that EHPM has recommended that I obtain travel insurance covering personal injury, trip delay, change or cancellation, loss of or damage to baggage, and other standard risk coverage for this trip.

I hereby assume all risk of personal injury, sickness, or death, and damage to or loss of my personal property, and any delay, change or cancellation of travel arrangements, and any and all other damage or expenses I may suffer as a result of participation in this ministry/mission trip or in activities related to it. I agree to be fully responsible for my actions. Should I become ill or injured or suffer other damage, I will pay all costs involved including costs of evacuation and medical care I might receive.

***Please carefully read and have the other side of this page notarized***

IN CONSIDERATION OF MY BEING PERMITTED TO PARTICIPATE AS A EHPM MEMBER ON THE ABOVE MINISTRY/MISSIONS TRIP: (*Please initial each paragraph*)

I ACCEPT AND ASSUME ALL RISKS AND HAZARDS FROM THIS ACTIVITY, BOTH KNOWN AND UNKNOWN, INCLUDING BUT NOT LIMITED TO THE RISKS AND HAZARDS IDENTIFIED ABOVE.

**Initials: \_\_\_\_\_\_\_\_\_\_**

**I HEREBY VOLUNTARILY RELEASE, FOREVER DISCHARGE, AND AGREE TO HOLD HARMLESS AND INDEMNIFY EHPM, ITS DIRECTORS, OFFICERS, AGENTS, EMPLOYEES, COORDINATORS, FACILITATORS, VOLUNTEERS, AND OTHER TEAM MEMBERS FROM ANY AND ALL LIABILITY, CLAIMS, DEMANDS, ACTIONS OR RIGHTS OF ACTIONS, WHICH ARE RELATED TO, ARISE OUT OF, OR ARE IN ANY WAY CONNECTED WITH MY PARTICIPATION IN THIS ACTIVITY, WHICH I NOW HAVE OR MAY HAVE IN THE FUTURE, SPECIFICALLY INCLUDING BUT NOT LIMITED TO THE NEGLIGENT ACTS OR OMISSIONS OF ANY PERSON SO RELEASED, HELD HARMLESS AND INDEMNIFIED, AND SPECIFICALLY INCLUDING CLAIMS RELATING TO ANY PERSONAL INJURY THAT I MAY SUFFER.**

**Initials:\_\_\_\_\_\_\_\_\_\_**

**I AGREE NOT TO MAKE A CLAIM, FILE SUIT OR DEMAND ANYTHING FOR ANY INJURY, DEATH OR LOSS THAT ARISES FROM MY PARTICIPATION IN THIS ACTIVITY.**

**Initials: \_\_\_\_\_\_\_\_\_\_**

**I AGREE TO PAY THE COSTS AND/OR LEGAL EXPENSES INCURRED BY THE TRIP LEADER(S), ORGANIZERS AND/OR PARTICIPANTS AS A RESULT OF ANY CLAIM OR SUIT FILED BY ME, OR FILED BY ANYONE ELSE AS A RESULT OF MY CONDUCT.**

**Initials: \_\_\_\_\_\_\_\_\_\_**

**I CONSENT AND AGREE TO PAY FOR ANY MEDICAL TREATMENT RENDERED TO ME BY ANYONE FOR ANY INJURY OR OTHER MEDICAL SITUATION DURING, OR RESULTING FROM, MY PARTICIPATION.**

**Initials: \_\_\_\_\_\_\_\_\_\_**

**I AUTHORIZE EHPM TO ARRANGE FOR TRANSPORTATION, FOOD, AND LODGING FOR ME ON THIS TRIP.**

**Initials: \_\_\_\_\_\_\_\_\_\_**

**I AGREE THAT THESE PROMISES, AGREEMENTS, ASSUMPTIONS OF RISK AND RELEASES BIND ME, MY FAMILY, ALL MINORS WITH ME OR ON WHOSE BEHALF I SIGN, AND MY HEIRS OR LEGAL REPRESENTATIVES AND ASSIGNS.**

**Initials: \_\_\_\_\_\_\_\_\_\_**

***I have read this release carefully, including this page and the prior page. I am aware that i am giving up important legal rights and sign of my own free will. (to be completed by applicant if 18 or older or by parent or guardian of applicant if applicant is under 18.)***

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Full Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***I hereby make each of the above statements, acknowledgements, authorizations, releases, discharges, hold harmless agreements, indemnities and other agreements on behalf of my minor child or children, accompanying me or participating alone on this trip whose name(s) appear(s) below, and agree that they shall be binding on each minor child, his heirs, successors and assigns:***

**Name of minor child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SUBSCRIBED AND SWORN TO THIS \_\_\_\_\_\_ DAY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NOTARY PUBLIC**

**My commission expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Discipline policy***

*“If your brother sins go and show him his fault in private; if he listens to you, you have won your brother. But if he does not listen to you, take one or two more with you, so that BY THE MOUTH OF TWO OR THREE WITNESSES EVERY FACT MAY BE CONFIRMED. If he refuses to listen to them, tell it to the church; and if he refuses to listen even to the church, let him be to you as a Gentile and a tax collector.” –Matthew 18:15-17*

It is the intent of EHPM to follow the biblical patterns of discipline within the confines of all international ministry trips. EHPM ministry trips are attempting to open up countries to renewal and revival, often attracting spiritual warfare. *1 John 2:1- “My little children, I am writing these things to you so that you may not sin And if anyone sins, we have an Advocate with the Father, Jesus Christ the righteous.”* The goal of EHPM is to create a safe, healthy environment, in order to minister to the people of the country visited.

We recognize that Ministry Team Members must be in correct relationship with God and with others, in order to ensure completion of mission objectives. The consequences of one’s sin or disobedience have the potential to bring confusion and destruction to any ministry trip. We desire to come along side each Ministry Team Member in loving correction only when necessary. All compliance with any disciplinary action by EHPM is greatly appreciated.

Below are procedures that will be followed by EHPM leadership, if any disciplinary action is necessary. To avoid any misunderstanding, please read the outlined procedures below, sign the consent form, and return it to EHPM. By consenting to the following, you agree to receive correction, public rebuke and/or removal, if decided necessary by EHPM leadership. If issues of sin or disobedience come to light, rest assured, the steps below will be followed to bring resolution to the situation.

1. If you have a problem with any individual, you are to lovingly approach that person first, without going to any other Ministry Team Member. Attempt to bring understanding and resolution to the conflict. If it is with someone of the opposite sex, please talk with him or her in a place where others are present, but can not hear your conversation. Many times what you may consider a problem is simply a misunderstanding and bringing it to their attention often brings resolution.
2. If you find no resolution after you have conversed with the individual, the individuals involved are required to discuss the problem with a Ministry Team Leader. The Ministry Team Leader should be able to determine what the problem is, who is at fault, and bring closure to the situation.
3. If the Ministry Team Leader discovers that there has been no closure to the situation, there will be another meeting with the parties involved, the Ministry Teal Leader, and the Trip Coordinator in order to bring closure to the difficult situation.
4. If the Ministry Team Leader and Event Coordinator find any individual to be in *rebellion to correction*, a senior EHPM representative will be informed. A senior EHPM representative will bring definite closure to the situation, in which all parties will be present to hear the final conclusion of the matter. Possible conclusions may include an individual returning home within 24 hours or being brought before the whole Ministry Team for public correction. If absolutely necessary, the Ministry Team will be informed not to have any personal contact with the individual throughout the remainder of the trip. The individual will not be permitted to eat, sleep, or travel with any Ministry Team Member.

5. If any individual is involved in any sin that can not, at the discretion of leadership, be taken care of in a timely manner or would affect the team in an adverse way, leadership reserves the right to put procedure (4) into action immediately.

*I AGREE TO FOLLOW THE DISCIPLINE PROCEDURES LISTED ABOVE IF DIRECTLY INVOLVED IN CONFLICT. AS A MINISTRY TEAM MEMBER I AGREE TO FOLLOW THE DIRECTIONS AND DECISIONS MADE BY EHPM LEADERSHIP REGARDING OTHER MINISTRY TEAM MEMBERS.*

*CONCERNING EHPM’S DISCIPLINE POLICY, I ALSO AGREE NOT TO CONSUME ANY ALCOHOL, DRUGS AND/OR TOBACCO, AND NOT TO USE ANY FOUL LANGUAGE FOR THE DURATION OF THE TRIP.*

SIGNED:X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**MEDIA RELEASE**

EHPM often takes photographs and video footage on ministry trips using them in EHPM advertising, promotional materials, web page, and publications. In signing below, you fully authorize EHPM to use video or photographs taken of you in any or all of the above-mentioned materials.

*I AUTHORIZE EHPM TO USE ANY PHOTOGRAPHS OR VIDEO FOOTAGE TAKEN OF MYSELF IN ANY AND ALL PUBLICATIONS MENTIONED ABOVE.*

SIGNED:X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_