***LIABILITY RELEASE/WAIVER***

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, do hereby acknowledge and assume the risk of participation in any and all activities (to include hunting, fishing, swimming, camping, and various other outdoor activities) in association with Sights on Christ (SOC). I voluntarily assume all risks of loss, damage, illness or injury that may be sustained while so engaged or as a result thereof. I agree to hold harmless, release, and indemnify SOC and its volunteers, members and agents in any location where SOC activities are conducted. I hereby accept full risk and danger of any hurt, injury, or damage that may occur by reason of any matter, thing, condition, negligence, or default, of any person or persons whatsoever. I will assume all expenses, medical, liability or otherwise, arising out of any injury while participating in SOC and understand that SOC does not provide health, accident, or liability insurance to volunteers in SOC activities.

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***PHOTO/IMAGE/VOICE RELEASE FORM***

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, do hereby give Sights on Christ (SOC), their assignees, licenses, and legal representative the irrevocable right to use my name (or any fictional name), picture, portrait, photograph, image, voice or quotes in all forms and media and in all manners, including composite or purpose, and I waive any right to inspect or approve the finished product, including written copy, that may be created in connection therewith. I also agree that this releases Sights on Christ and any and all its representatives from any and all monetary obligations or payments to me or any or all my authorized representatives for use of video, films, photographs, image and/or voice of myself. I am of full legal age. I have read this release and am fully familiar with its contents.

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CONSENT FOR MINOR:**

I am the parent, or legal guardian, of the minor named above. I have the legal authority to execute the above releases. I approve the foregoing and waive any rights in the premises.

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_