



LIABILITY WAIVER

Release of Liability and Authorization to Obtain Medical Care

I understand the Biblical standard for resolving disputes. Therefore, I hereby waive my right to file a lawsuit in any civil court or other secular setting against In Motion Ministries, any individual involved with this mission adventure or any other organization working in connection with In Motion Ministries during this mission adventure.

I hereby release all leaders and organizations involved with this mission trip from any and all legal liability. I hereby waive all my rights to any legal liability, on the part of In Motion Ministries or any other individuals or organizations involved, which liability may result from sickness, injury, or death that may occur on or related to this trip. I understand that there are hazards, and I am fully assuming these risks, including but not limited to, damage or loss of property, hazardous traffic, poorly constructed roads, potential military or political problems, sickness, and disease. I specifically release In Motion Ministries and all concerned from any claim of negligence in their duties as leaders, or otherwise, on this mission trip.

I hereby further acknowledge that if I am injured or become ill, I authorize the leadership of In Motion Ministries to make essential decisions on my behalf with respect to medical treatment, emergency surgery, hospitalization or evacuation. I agree that neither In Motion Ministries, nor any of its representatives, are responsible or liable for any complications arising from the administration of any emergency medical treatment. I agree that neither In Motion Ministries, nor any of its representatives, shall in any way be responsible or liable for payment of any and all bills for such medical treatment. I assume the full responsibility for any and all medical bills incurred related to this mission adventure. My estate and my family shall further assume full and total cost for the return shipping of my body should I die by any cause on this mission.

I have read and agree to the IMM policy on cancellation and refunds.

I accept responsibility to have all travel documents in proper order.

I agree to abide by decisions made by IMM leaders and those in authority.

I acknowledge that it is my responsibility to provide any insurance coverage, of any and all types, which I may need or desire that is above and beyond the medical insurance that In Motion Ministries provides for international mission trips.

I have read and am in full agreement with this release and waiver, and fully understand that I am: waiving any rights I may have to litigate and sue and instead am accepting biblically-based mediation to resolve disputes; accepting full responsibility for all insurance, and all medical costs; authorizing In Motion Ministries to make medical decisions if necessary; and agreeing to read and abide by all guidelines, policies, rules, and leadership decisions pertaining to this mission adventure.

I certify that all the information given on this In Motion Ministries application is accurate and true to the best of my knowledge.

Applicant:

Printed Name _____

Signature _____

Date _____

If Applicant is Under Age 18:

Printed Name of Parent or Legal Guardian _____

Signature of Parent or Legal Guardian _____

Date _____