



**Youth Serve Local Sign Up Form**  
July 27th-31st 2020

Name \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_

Emergency contact Phone \_\_\_\_\_

Allergies that would be relevant to our trip \_\_\_\_\_

\_\_\_\_\_  
\*The church will not be providing or serving any form of food during this trip.

**Liability Waiver**

I understand that my child's participation in this mission experience is voluntary and that my child is free to choose not to participate. I agree to indemnify and hold harmless Avon UMC, its pastors, employees, trustees, and volunteers from any and all claims, damage, or loss concerning any cause of action whatsoever arising out of or concerning my child's involvement in the mission experience at Avon UMC. I will pay all expenses incurred by Avon UMC, its pastors, employees, or trustees in defending such claims, including, but not limited to, attorneys' fees, expenses, court costs, judgments, settlements, or awards against Avon UMC by a court of law or otherwise. Avon UMC will not be responsible for any personal injury or property damage that may occur during participation in the mission experience. I understand that in case of emergency or injury regarding my child, 911 will be called and I will be contacted regarding the details. I will be responsible for any payment in association with the emergency.

Student signature \_\_\_\_\_ Date \_\_\_\_\_

Parent signature \_\_\_\_\_ Date \_\_\_\_\_