

# RELEASE AND INDEMNITY

In consideration for each child of mine listed below being given the opportunity to participate in the event described below, as the parent and/or natural and/or legal guardian of such child/children, I hereby expressly release and discharge Christ Fellowship of Franklin (the Church), its agents, representatives and employees of and from any and all claims for damage or loss that I may have arising out of any injury to my child/children or his/her/their property which is related in any way to the event described below and that results from any negligent (or allegedly negligent) act and/or omission by the Church or by its agents, representatives or employees.

I further agree to indemnify and hold harmless the Church, its agents, representatives, and employees from and against any and all claims for damages which may at any time be asserted by my child or by any person on behalf of my child as a result of any negligent (or allegedly negligent) act and/or omission committed by the Church, its agents, representatives or employees which is in any way related to the event referred to below.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Name(s) of Child/Children: \_\_\_\_\_

\_\_\_\_\_

Description of Event: **Visiting the Nursing Home**

\_\_\_\_\_

**Christ  
Fellowship**



\_\_\_\_\_  
Parent or Guardian Name (please print)

\_\_\_\_\_  
Parent or Guardian Signature