

## SunWest Participation & Release Form for Youth Mexico Missions Trip 2026 (March 20 – March 30, 2026) Overnight / Out of City Excursion Waiver Form

RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT BY SIGNING THIS DOCUMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE.

## PLEASE READ CAREFULLY!

In consideration for allowing my minor child/ward to participate in all related events and activities of **SunWest Christian Fellowship & Ministries**, herein referred to as **SCF**, wherein, I hereby warrant and agree that:

1.	I am the parent/guardian having full legal responsib	pility for decisions regarding my minor child/ward, namely	
	(child's name)	; and	
2.	death from participation in any part of this trip. The recreation and work activities involved therein particlimbing & bicycling, etc.), games, mission trips & t of the program of <b>SCF</b> and acknowledge that activi	and my minor child/ward that there is the risk of serious injury and se risks are inherent in all activities as a result of participation in cularly those involving fitness activities (ie: hiking, river rafting, rock ransporting individuals in vehicles, and like activities offered as part ties involve additional risks & dangers such as weather conditions accept the dangers on behalf of my child/ward and	
3.		nild/ward is physically, emotionally and mentally able to participate nanically fit and appropriate for his/her use in this event; and	
4.	I understand, and will instruct my minor child/ward, that all applicable rules for participation must be followed and that at all times the sole responsibility for personal safety remains with my minor child/ward; and		
5.	I agree that my child/ward will immediately be removed from participation, and <b>SCF</b> will notify me, if at any time an observation of any unusual hazard or unsafe conditions are presented as a result of his/her behavior or activities of engagement or if <b>SCF</b> feels that my minor child/ward has experienced any deterioration in his/her physical, emotional or mental health and/or fitness, or in the adequacy of his/her equipment, for continued participation in the event or activity; and		
6.	I am aware that my child/ward will be crossing both the United States and Mexico borders, and therefore give full guardianship to Trent Berstad, Volunteer Leader of the Mexico Trip. In the event that Trent Berstad becomes unable to take guardianship for my child/ward, I allow guardianship to be passed on to Matt Dyck, Lead Pastor of SunWest Christian Fellowship.		
7.	I authorize the medic team to give or apply over the counter medications as seen necessary to my child according to their professional opinions for the duration of this trip. I authorize Trent Berstad and/or Matt Dyck to sign a consent for medical treatment and/or to authorize any physician or hospital to provide medical assessment, treatment or procedures for my child.		
I SIGN	N THIS DOCUMENT VOLUNTARILY AND WITHO	UT INDUCEMENT this day of 20	
at		Canada	
 Signatu	ure of Parent/Guardian	Printed name of Parent/Guardian	

Printed name of Parent/Guardian

Signature of Parent/Guardian

I UNDERSTAND AND AGREE, ON BEHALF OF MY MINOR CHILD/WARD, HIS/HER HEIRS, ASSIGNS, PERSONAL REPRESENTATIVES AND NEXT OF KIN, MYSELF, MY HEIRS, ASSIGNS, PERSONAL REPRESENTATIVES AND NEXT OF KIN THAT MY EXECUTION OF THIS DOCUMENT CONSTITUTES:

- 1. A FULL AND FINAL RELEASE AND WAIVER OF LIABILITY AND ALL CLAIMS that I have or may in the future have against **SCF**, event sponsors, event venues, and their respective directors, officers, employees, instructors, contractors, agents and representatives, advertisers, volunteers, other participants, (all of whom are collectively referred to as "the Releasees") from any and all liability for any loss, damage, injury or expense that my minor child/ward may suffer, or that his/her next of kin may suffer as a result of his/her use of or my presence at the event facilities or my child's/ward's participation in any part of, or presence at, the games, events, mission trips and activities of **SCF**, due to any cause whatsoever, INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, INCLUDING ANY DUTY OF CARE OWED UNDER THE RELEVANT OCCUPIERS LIABILITY ACT, ON THE PART OF THE RELEASEES.
- 2. AN AGREEMENT NOT TO SUE THE RELEASEES for any loss, injury, costs or damages of any form or type, howsoever caused or arising, and whether directly or indirectly from the participation of my minor child/ward in any aspect of the games, events and activities **SCF**; and
- 3. AN AGREEMENT TO INDEMNIFY, and to SAVE and HOLD HARMLESS the RELEASEES, and each of them, from any litigation expense, legal fees, liability, damage, award or cost, of any form or type whatsoever, they may incur due to any claim made against them or any one of them whether the claim is based on the negligence or the gross negligence of the Releasees or otherwise.
- 4. An agreement that this document be governed by the laws, and in the courts of the Country, State, Province or Territory in which the events and related activities take place.

5.

I agree to obtain my own travel medical insurance for the trip participant for the full duration of this trip (check box).

I agree to photos and/or videos being taken of my child and used on any publication, advertising or website of SCF.

I (we) are the parent(s) or legal guardian(s) of this participant, and hereby grant our (my) permission for him/her to participate fully in said event and hereby give our permission to take said participant to a doctor or hospital and hereby authorize medical treatment, including but not limited to emergency surgery or medical treatment, and assume the responsibility of all medical bills, if any.

**Further, should it become** necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, I (we) hereby assume all transportation costs.

I HAVE READ AND UNDERSTAND THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN SUBSTANTIAL LEGAL RIGHTS WHICH MY MINOR CHILD/WARD, HIS/HER HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNS AND I AND/OR MY MINOR CHILD/WARD MAY HAVE AGAINST THE RELEASEES.

I SIGN THIS DOCUMENT VOLUNTARILY	20	
at ,	, Canada	
Signature of Parent/Guardian	Printed name of Parent/Guardian	
Signature of Parent/Guardian	Printed name of Parent/Guardian	

## **Trip Participant Only**

I have read the above 2 pages and understand the rules of conduct and will fully abide by them, as well as all additional instructions of the leadership of this trip, and activity directors.

X	