



## Horizon Christian Fellowship Sand Volleyball Tournament Waiver and Release of Liability

I, \_\_\_\_\_ (name) give my permission for the Horizon Christian Fellowship church and event staff to treat me (or my child if a minor) to the best of their knowledge in the event of an emergency. By signing below, I understand the risks involved in physical activity, sport, and volleyball and do not hold Horizon Christian Fellowship, neither the Church of the Nazarene, nor any of its staff or volunteers liable in the event of accident or injury.

In the event of an emergency please notify:

\_\_\_\_\_ at \_\_\_\_\_.  
(name) (phone number)

Relationship: \_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

If participant is a minor:

\_\_\_\_\_  
Participant's Name

\_\_\_\_\_  
Parent's Name