

CONSENT AND RELEASE FORM FOR GSBC COLLEGE DAYS ACTIVITY

I, the undersigned parent(s) or guardian(s), hereby consent to my child, _____, who is ____ years of age, participating in the activities connected with the COLLEGE DAYS EVENTS, an activity sponsored by Golden State Baptist College on the following dates: MARCH 27 & 28, 2023. I understand that this activity will include the following: ACTIVITY TO SKYZONE TRAMPOLINE PARK. I certify that my child is able to participate in any and all of these activities. If my child has medical conditions which may be relevant to a physician in the event an emergency, I have listed them below. If I cannot be reached within a reasonable period of time, as determined by college officials, I hereby authorize the college or the adult sponsor, DAVID SLOAN, to make emergency medical decisions for my child. If there are any activities that I do not want my child to be involved in, I have listed them below.

I UNDERSTAND AND HEREBY AGREE TO ASSUME ALL OF THE RISKS WHICH MAY BE ENCOUNTERED ON SAID ACTIVITIES, INCLUDING ACTIVITIES PRELIMINARY AND SUBSEQUENT THERETO. I do, for myself and for my child, heirs and assigns, hereby irrevocably and unconditionally release, acquit and forever discharge Golden State Baptist College and its agents, employees, and volunteers from any and all liability, actions, causes of actions, claims, expenses, obligations, and damages of any nature whatsoever, which I now have or which may arise in the future, in connection with my child's participation in the described activity or in any other associated activities including, but not limited to, any injury to my child or property, even injury resulting in death.

I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by the law of the State of California, and that if any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. I expressly agree that any dispute arising from this activity shall be submitted to binding arbitration, to the extent it is not covered by insurance. This release contains the entire agreement between the parties hereto.

I further state that **I HAVE CAREFULLY READ AND UNDERSTAND THE FOREGOING RELEASE AND KNOW THE CONTENTS HEREOF, AND I SIGN THIS RELEASE AS MY OWN FREE ACT.** I understand that this is a legally binding agreement.

Medical conditions to be aware of: _____

Physical restrictions: _____

Instructions and medications: _____

Date of last tetanus or booster: _____

I do **not** wish my child to participate in the following:

Parent or Guardian Date

Parent or Guardian Date

Telephone numbers where I may be reached in an emergency:

Golden State Baptist College
3520 De La Cruz Blvd • Santa Clara, CA 95054 • (408) 988-8551
Dr. Jack Trieber, President