

**HOLY TRINITY MONASTERY SUMMER YOUTH PROGRAM
REQUIRED HOLD HARMLESS AGREEMENT AND MEDICAL RELEASE**

We, the undersigned are desirous of having our child or children participate in the Holy Trinity Monastery Summer Youth Program and whereas the Holy Trinity Monastery Summer Youth Program is willing to accept them as participants on the condition of this instrument.

Therefore, in consideration of the Holy Trinity Monastery Summer Youth Program's authorization, the undersigned parents or guardians and children agree that the children participating in the Holy Trinity Monastery Summer Youth Program do so at their own risk. Neither the Holy Trinity Monastery Summer Youth Program, Program Administrators, officers, program volunteers, the Russian Orthodox Church Abroad, Holy Trinity Monastery, Holy Trinity Seminary, or associate shall be liable for any damages arising from personal injuries sustained by the child in participation of any activity or aspect of the Holy Trinity Monastery Summer Youth Program. The parents or guardians and child assume full responsibility for any injuries which may occur to the child in said participation and they do hereby fully and forever release and discharge and agree to indemnify and hold forever harmless the Holy Trinity Monastery Summer Youth Program, Program Administrators, officers, program volunteers, the Russian Orthodox Church Abroad, Holy Trinity Monastery, Holy Trinity Seminary, and associates, individually and jointly, and all employees and agents of them from any and all claims, demands, damages, rights of action or causes of action present or future including claims for contribution and indemnification whether the same be known anticipated or unanticipated resulting from or arising from the above mentioned activity. The undersigned do acknowledge that they have made inquiry into the nature of the activity and have no further questions concerning the nature or conduct of the activity and with such full understanding do hereby cause this instrument of release indemnity to be executed.

In the event my child should become ill, or sustain an injury while in the care of the Holy Trinity Monastery Summer Youth Program, I, the undersigned parent or guardian, grant authority to the Holy Trinity Monastery Summer Youth Program Administrator, nurse, or official to act on my behalf in obtaining any medical treatment that may be necessary. This consent is in effect from June 24, 2017 to July 16, 2017. I will be responsible for all medical expenses.

Name of attendee: _____

Name of parent/guardian: _____

Signature of parent/guardian

date