



# Short Term Mission Trip to Honduras 2018 - Participation Agreement and Waiver

I acknowledge that participation in the First Colony Church of Christ's Mission Trip to Honduras ("the Project") involves risk to the participant (and to the participant's parents or guardians, if the participant is a minor), and may result in various types of injury including, but not limited to, the following: sickness, bodily injury, death, emotional injury, personal injury, property damage, and financial damage.

In consideration for the opportunity to participate in the Project, the participant (or parent/guardian if the participant is a minor) acknowledges and accepts the risks of injury associated with participation in the Project. The participant (or parent/guardian) accepts personal financial responsibility for any injury or other loss sustained during the Project as well as for any medical treatment rendered to the participant that is authorized by First Colony Church of Christ or its agents, employees, volunteers, or any other representatives (collectively referred to as the "sponsor"). FURTHER, THE PARTICIPANT (OR PARENT/GUARDIAN) RELEASES AND HEREBY AGREES TO INDEMNIFY, DEFEND, AND HOLD HARMLESS THE SPONSOR FROM AND AGAINST ANY AND ALL CLAIMS FOR ANY INJURY ARISING DIRECTLY OR INDIRECTLY OUT OF THE DESCRIBED ACTIVITY, WHETHER SUCH INJURY ARISES OUT OF THE NEGLIGENCE OF THE SPONSOR, THE PARTICIPANT, OR OTHERWISE, INCLUDING, BUT NOT LIMITED TO, SICKNESS, INJURY, OR DEATH THAT MAY RESULT FROM HAZARDOUS TRAFFIC, POORLY CONSTRUCTED ROADS, DANGERS RESULTING FROM MILITARY OR POLITICAL PROBLEMS, DANGERS RESULTING FROM POLITICAL OR CIVIL UNREST, CRIMINAL ACTIVITY, WARFARE, VIOLENCE, TERRORISM OR ANY OTHER VIOLENT ACTIVITY; ILLNESS OR ACCIDENT IN REMOTE PLACES IN HONDURAS WITHOUT IMMEDIATE ACCESS TO MEDICAL FACILITIES, AND THE FORCES OF NATURE; SICKNESS OR DISEASE (INCLUDING WITHOUT LIMITATION, MALARIA OR OTHER ILLNESS OR DISEASES CONTRACTED DURING THE TRIP); INJURY OR SICKNESS FROM ANY ANIMAL, QUARANTINE, OR GOVERNMENT RESTRICTION OR REGULATION; ANY ACT OR OMISSION BY ANY STEAMSHIP, AIRLINE, RAILROAD, TAXI, BUS, HOTEL, RESTAURANT, OR UNIVERSITY; OR ANY FINANCIAL OBLIGATION OR LIABILITY, OR DAMAGE OR INJURY TO ME, OR TO MY PROPERTY.

I hereby accept responsibility for obtaining and carrying my own passport, visa, or other document required for purpose of participating in the Trip.

I acknowledge that I have read the U.S. State Department's Consular Information Sheet for Honduras, all Travel Warnings and Public Announcements, and I am aware of the risks involved with international travel in general and with travel in this country in particular.

\_\_\_\_\_ (Initials) I hereby certify that the participant (or parent/guardian if the participant is a minor) has personal health insurance which will provide coverage while participating on the Project.

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The participant (or parent/guardian) grants permission to use the participant's photo for First Colony Church of Christ publicity and publications, including, but not limited to, the First Colony Church of Christ website, Facebook page, and printed material.

If a dispute over this agreement or any claim for damages arises, the participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable alternative dispute resolution process. If the participant (or parent/guardian) and the sponsor cannot agree upon such a process, the dispute will be settled by legally binding arbitration in accordance with the *Rules of Procedure for Christian Conciliation* of the Institute for Christian Conciliation, a division of Peacemaker Ministries (hereinafter the "Rules"). The complete text of the Rules may currently be obtained by accessing [www.HisPeace.org](http://www.HisPeace.org). Judgment upon an arbitration decision may be entered in any court otherwise having jurisdiction.

I HAVE READ THIS PARTICIPATION AGREEMENT AND WAIVER, FULLY UNDERSTOOD ITS TERMS, UNDERSTAND THAT I MAY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Participant's Name (Please Print): \_\_\_\_\_

Signature of Participant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_  
(If the Participant is a minor)