

Religious Youth Service

Acceptance Confirmation and Medical Release Form

This form needs to be completed by every participant before attending the RYS.

Print or type legibly; after completion Fax to your project service coordinator and hand the original to the project registrar.

Personal Information:

Project name and dates:	
First Name	
Last Name	
Gender	
Emergency Contact #1 (Name/Telephone # and Email address)	
Emergency Contact #2 (Name/Telephone # and Email address)	
Medical allergies, Dietary requirements, Known Medical concerns including medications currently taken	
Date of Birth (Day/Month/Year)	

By signing this form I (the person named above) am verifying that:

1. The above information is correct.
2. I agree to the guidelines explained under Participant Guidelines in the Religious Youth Service acceptance packet. If I do not live up to these standards, Religious Youth Service has the right to dismiss me. If dismissed, I am responsible for any costs incurred.
3. I understand that the Religious Youth Service (and any other sponsoring or hosting organization) is not responsible for lost or damaged personal items.
4. I agree to permit the use of any photographs, slides, videotapes, sound recordings, and similar items that might contain my image and/or voice, for use in promotional and or informational activities that are deemed appropriate by the Religious Youth Service or any sponsoring organizations.
5. At all times I will demonstrate respect for the religious beliefs and culture of others in the host country, as well as my fellow participants.
6. I am in good health and have no medical condition that would limit my ability to fully participate in the Religious Youth Service events and general program. In case of a medical emergency, I give permission for the staff of the Religious Youth Service Program to have me medically treated.
7. I understand and agree that there are unavoidable risks in travel overseas. I hereby waive and release any and all claims against Religious Youth Service, its directors, officers, agents, employees and affiliated organizations, arising out of or relating to my participation in any Religious Service Program, including, but not limited to, claims for any injury, loss, or damages.
8. I also agree to defend, indemnify and hold harmless the Religious Youth Service, its directors, officers, agents, employees, students, residents, and their affiliated organizations, from and against any and all liabilities, claims, lawsuits, judgments, losses, damages, and expenses, including attorneys' fees, arising out of any financial obligations or liabilities that I may personally incur, or any damage or injury to the person or property of others that I may cause, while participating in the named program.
9. I agree that if there is any dispute concerning my participation in the program or the interpretations of this Agreement, any such disagreement shall be determined in accordance with the laws of the State of New York.
10. The terms and conditions of this Waiver and Release of Liability represent my complete understanding of the subject matter hereof, and supercedes any previous or contemporaneous understandings I may have had with the Religious Youth Service on this subject, whether written or oral, and cannot be changed or amended in any way without the written concurrence of both the Religious Youth Service and myself.
11. I agree that should any provision or aspect of this Agreement be found to be unenforceable, that all remaining provisions of the Agreement will remain in full force and effect.
12. I HAVE CAREFULLY READ THIS RELEASE AND WAIVER OF LIABILITY AND FULLY UNDERSTAND ITS CONTENTS. I FURTHER ACKNOWLEDGE AND AGREE THAT I HAVE HAD AN OPPORTUNITY TO CONSULT WITH COUNSEL OF MY CHOICE PRIOR TO EXECUTING THIS RELEASE AND WAIVER OF LIABILITY. I ACKNOWLEDGE AND AGREE THAT THIS RELEASE SHALL BE BINDING UPON ME, MY SURVIVORS, HEIRS, SUCCESSORS, AND ASSIGNS. I AM AWARE THAT THIS RELEASE AND WAIVER OF LIABILITY IS A RELEASE OF LIABILITY, INCLUDING BUT NOT LIMITED TO, LIABILITY FOR NEGLIGENCE, INDEMNIFICATION, AND A HOLD HARMLESS AGREEMENT, AND I SIGN IT ON MY OWN FREE WILL. THIS RELEASE AND WAVIER OF LIABILITY IS IN ADDITION TO AND DOES NOT REVOKE OR MODIFY ANY OTHER AGREEMENT OR RELEASE WHICH I MAY EXECUTE IN CONNECTION WITH THE VOLUNTEER PROGRAM.
13. I have read all of the above information and consent to all of the foregoing provisions.

Signature of the participant: _____ Date: _____

If the participant is younger than 18 years old, he or she needs to have his or her parent or guardian sign this form as well.

Signature of participant's parent or guardian: _____ Date: _____