



## OKLAHOMA CONFERENCE OF THE UNITED METHODIST CHURCH

### Oklahoma Volunteers In Mission

FULL NAME OF MINOR MISSIONER: \_\_\_\_\_

ADDRESS OF MINOR MISSIONER: \_\_\_\_\_

TRAVEL DATES AND DESTINATIONS: \_\_\_\_\_

METHOD OF TRAVEL (airlines, flight #, etc.): \_\_\_\_\_

REASONS FOR TRAVEL: \_\_\_\_\_

**PERMISSION:** I/We am or are the parent, parents, guardian, and/or guardians of the above named missioner who is a minor residing at the address set forth above (the "Minor"). I/We hereby permission for the Minor to accompany a United Methodist Volunteers In Mission team to perform certain mission work and to participate as a member of a mission group.

**ASSUMPTION OF RISK:** I/We have voluntarily elected to allow the Minor to participate in certain mission work coordinated by and through Oklahoma Volunteers In Mission (the "Mission Work"). I/We affirm and acknowledge that I/we have agreed to allow the Minor to participate in the Mission Work entirely upon my/our own initiative, risk, and responsibility. I/We have been advised and fully understand that while participating in the Mission Work, the Minor may be exposed to unusual risks. These risks may include, but are not necessarily limited to, the following: diseases, including air, food and/or water-borne illness; civil insurrection, warfare and/or political unrest; acts of terrorism; post-warfare or post-insurgency hazards; adverse geographic conditions; extreme heat and/or humidity with the possibility that no air conditioning will be available; extreme cold with the possibility that no central heating will be available; environmental conditions such as high altitude, which could have a harmful effect on the Minor if he/she has a heart condition or respiratory disease; native plants and/or animals; vehicle accidents; and/or worksite accidents. I/We understand that the foregoing is not an exhaustive list of dangers that may arise but is illustrative of some types of dangers or risks that the Minor may face while participating in the Mission Work. I/We affirm and acknowledge that I/we have been informed of the inherent hazards and risks associated with the Minor participating in Mission Work and that I/we fully understand that these risks can lead to bodily injury, death or property loss or damage. With this understanding, I/we knowingly allow the Minor to assume these risks. I/We agree that this assumption of risk clause shall be construed broadly to the maximum extent permissible under applicable law.

**LIABILITY RELEASE:** I/We do hereby for myself and the Minor, and our heirs, executors, and administrators, remise, release, hold harmless, and forever discharge the Mission Work team leaders, Mission Work team members, The United Methodist Church, The South Central Jurisdiction of the United Methodist Church, The Oklahoma Conference of The United Methodist Church, The General Board of Global Ministries of The United Methodist Church, The Annual Conference of The United Methodist Church, United Methodist Volunteers In Mission, Oklahoma Volunteers In Mission, and all of their respective officers, employees, volunteers, members, and affiliated organizations, as well as any and all other participants and/or sponsors of the Mission Work, acting officially or otherwise, from all claims, demands, damages, actions or causes of action, liabilities, losses, charges, controversies, costs and expenses of any nature, character, kind, and description, based in law and/or in equity, known or unknown, accrued or not yet accrued, whether anticipated or unanticipated, including the Minor's death or any injury the Minor may suffer, or any loss or damage to my property or the Minor's property which may occur directly or indirectly from, or arising out of, any cause, while the Minor is participating in the Mission Work, as well as all ground and flight travel incident to such Mission Work. This Release shall be construed broadly to the maximum extent permissible under applicable law. THIS RELEASE SHALL REMAIN IN EFFECT UNTIL RESCINDED BY ME/US, IN WRITING.

**MEDICAL RELEASE:** It is my/our intention by this document to consent to the Minor's participation in the mission trip, to consent to allow the team leader(s) to act *in loco parentis* [In the place of the parent] for the duration of the Mission Work, and to waive and forego all right of action by myself/ourselves and the Minor against the parties herein before named in the above Liability Release. I/We further expressly authorize and consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment, and/or hospital care under the general or special supervision, and on the advice of, a licensed physician, surgeon, anesthesiologist, dentist, or other qualified medical personnel acting under their supervision, for the Minor, should the same become necessary because of illness or injury. I/We specifically authorize a physician or other appropriate medical professional to treat the Minor's preexisting condition, if any, by performing any procedure deemed necessary by the treating physician and by prescribing any prescription medicine the Minor is currently taking or needs to take in order to safeguard the Minor's life or well being and providing such prescription to the Minor for treatment. The Liability Release set forth above shall apply in full to the authorizations granted by this clause. THIS RELEASE SHALL REMAIN IN EFFECT UNTIL RESCINDED BY ME/US, IN WRITING.

**MEDIA RELEASE:** So that Oklahoma Volunteers In Mission can continue to share the love of Christ by telling the story of the ministry, I consent to the use of my image or voice in photographs, audio and/or video recordings (including digital) taken during the course of this mission for the publicity of the Volunteers In Mission Program. THIS RELEASE SHALL REMAIN IN EFFECT UNTIL RESCINDED BY ME/US, IN WRITING.

**CONDUCT OF MINOR:** I/We acknowledge that the Minor is expected to conduct himself / herself responsibly throughout the trip and while performing mission work and will conform generally to the applicable laws of the jurisdiction in which the Minor is traveling, including but not limited to any such laws or policies pertaining to alcohol consumption and/or drug use, etc.

**GOVERNING LAW:** I/We agree that the substantive and procedural laws of the State of Oklahoma shall govern the validity, construction, interpretation, performance and enforcement of this instrument or the subject matter covered thereby and I/we agree to jurisdiction in Oklahoma without reference to its conflict of laws provisions. I/We also hereby agree that any action and/or proceeding in connection with this instrument or the subject matter covered thereby shall only be brought in the venue of Oklahoma County, Oklahoma.

\_\_\_\_\_  
*Signature of Parent / Guardian* Date: \_\_\_\_\_

Print Full Name: \_\_\_\_\_ Relationship to Minor: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Parent / Guardian* Date: \_\_\_\_\_

Print Full Name: \_\_\_\_\_ Relationship to Minor: \_\_\_\_\_

THIS INSTRUMENT WAS SIGNED ON THE ABOVE DATE BY THE ABOVE PERSON(S) IN THE PRESENCE OF EACH OF US, THE UNDERSIGNED WITNESSES, AS A FREE AND VOLUNTARY ACT AND DEED FOR THE PURPOSES THEREIN EXPRESSED.

\_\_\_\_\_  
*Signature of Witness* \_\_\_\_\_  
*Signature of Witness*

Print Full Name: \_\_\_\_\_ Print Full Name: \_\_\_\_\_

**For INTERNATIONAL travel only – ORIGINAL TO TEAM LEADER and Copy to OKVIM**

THIS INSTRUMENT WAS SIGNED ON THE ABOVE DATE BY THE ABOVE PERSON(S) IN THE PRESENCE OF ME, THE UNDERSIGNED NOTARY PUBLIC, AS A FREE AND VOLUNTARY ACT AND DEED FOR THE PURPOSES THEREIN EXPRESSED.

\_\_\_\_\_  
[Signature of Notary]

Print Name: \_\_\_\_\_

NOTARY PUBLIC

My commission expires: \_\_\_\_\_

**AT ALL TIMES WHILE IN MEXICO MINOR MUST CARRY ORIGINAL OF THIS INSTRUMENT AS WELL AS PROOF OF PARENT/GUARDIAN AND CHILD RELATIONSHIP (birth certificate and/or certified court d**

