MINOR WAIVER

PARENT/GUARDIAN AUTHORIZATION LIABILITY WAIVER AND RELEASE

Gospel Lakes Ministries, Inc., also known as "Gospel Lakes Ranch", requires that a parent or guardian of all minors sign this waiver and release form before the minor participates in any and all GENERAL ACTIVITIES, HORSE/EQUINE ACTIVITIES, or BOATING/AQUATIC ACTIVITIES. The undersigned acknowledges that while attending Gospel Lakes Ranch and participating In activities and programs, certain risks and dangers may occur. The undersigned further recognizes that these risks may also include physical, emotional or psychological damage or injury, not excluding fatality, due to accidents that may occur or result from being in a wilderness area, forces of nature, any general activities, horse/equine activities, and boating/aquatic activities as well as other such activities arranged by our organization and/or your group leader.

The undersigned agrees to abide by all policies and procedures of Gospel Lakes Ministries Inc. in order to maintain the utmost level of safety. The undersigned also releases any and all rights to photographs and/or videos of camp activities that may include said minor for use in camp literature and fund raising information. With respect to horse/equine activities, House Bill 280 took effect on September 1, 1995, and contains the following warning:

In consideration for receiving permission to BE ON PREMISES at GOSPEL LAKES MINISTRIES (hereinafter the "Activity or Activities"), I, on behalf of myself and any minor child/children for whom I have the capacity to contract, hereby acknowledge and agree to the following:

- 1. I understand the hazards of the novel coronavirus ("COVID-19") and am familiar with the Centers for Disease Control and Prevention ("CDC") guidelines regarding COVID-19. I acknowledge and understand that that the circumstances regarding COVID-19 are changing from day to day and that, accordingly, the CDC guidelines are regularly modified and updated and I accept full responsibility for familiarizing myself with the most recent updates.
- 2. Notwithstanding the risks associated with COVID-19, which I readily acknowledge, I hereby willingly choose to participate in Activities.
- 3. I acknowledge and fully assume the risk of illness or death related to COVID-19 arising from my being on the premises and participating in the Activities and hereby RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE (on behalf of myself and any minor children form whom I have the capacity contract) Bennie & Judith Hasha, GOSPEL LAKES MINISTRIES, Inc., My Favorite Campground, their owners, officers, directors, agents, employees, volunteers and assigns (the "RELEASEES") from any liability related to COVID-19 which might occur as a result my being on the premises and participating in the Activities.
- 4. I shall indemnify, defend and hold harmless the RELEASEES from and against any and all claims, demands, suits, judgments, losses or expenses of any nature whatsoever (including, without limitation, attorneys' fees, costs and disbursements, whether of in-house or outside counsel and whether or not an action is brought, on appeal or otherwise), arising from or out of, or relating to, directly or indirectly, the infection of COVID-19 or any other illness or injury.
- 5. It is my express intent that this Waiver and Hold Harmless Agreement shall bind any assigns and representatives, and shall be deemed as a RELEASE, WAIVER, DISCHARGE, AND COVENANT NOT TO SUE the above-named RELEASEES. This Agreement and the provisions contained herein shall be construed, interpreted, and controlled according to the laws of the State of Texas. I HEREBY KNOWINGLY AND VOLUNTARILY WAIVE ANY RIGHT TO A JURY TRIAL OF ANY DISPUTE ARISING IN CONNECTION WITH THIS AGREEMENT. I ACKNOWLEDGE THAT THIS WAIVER WAS EXPRESSLY NEGOTIATED AND IS A MATERIAL INDUCEMENT THE PERMISSION GRANTED BY RELEASEES TO BE ON PREMISES AND PARTICIPATE IN THE ACTIVITIES.

Minor Registration Form					
Participating Church Group:					
Minor:		Sex	x: Male	/ Female	(Circle One)
Birth date://	Parent/Guardian: _				
Address:				Ap	t #:
City:	State:	Zip Code:			
Phone (home): ()		Phone (work) : ()		
Emergency Contact:	Em	ergency Phone: ()		
Health History: Please list any specific medical allerg	ies, chronic illness, or	other conditions to be a	aware of: _		

Parent/Guardian Authorization:

This health history is correct so far as I know, and the person herein described has permission to be transported & engage in all prescribed activities except noted by me. In the event I cannot be reached in an emergency, the authority is granted to seek emergency medical attention for the child as named above.

The undersigned also agrees and understands that Gospel Lakes takes numerous photos and videos. I hereby authorize and consent to the use of images or videos of my child/children listed above, with or without their name(s), by Gospel Lakes Ranch of New Waverly, TX, its officers, trustees, employees and agents from liability for any claims by me or any third party in connection with the use of the image of my child/children listed above.

Parent/ Guardian Signature	Date
Parent/ Guardian Printed Name	

