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## **2021 Illness Liability Form**

**NOTICE: THIS IS A LEGALLY BINDING AGREEMENT. Read this document carefully and in its entirety. By signing this agreement, you give up your right and the named minor's right to bring a court action to recover compensation or obtain any other remedy for any personal injury or property damage however caused arising out of the named minor's participation in THE ARK Christian Ministries programs, now or any time in the future.**

(Participants' name)

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I affirm that I am qualified, in good health, and in proper physical condition to participate in all of the activities of THE ARK Christian Ministries in the city of Converse, County of Grant, and the State of Indiana. I understand the nature of camp activities and the communal living arrangements. I fully understand that participating in the community of, or any of the activities, or using of any facilities or equipment of THE ARK Christian Ministries, or engaging in or receiving instruction in any activity or activity incidental thereto some of which may involve dangers and risk of illness (including but not limited to COVID-19 or Pediatric Multi-Symptom Inflammatory Syndrome), serious bodily injury, including permanent disability, paralysis and death which may be caused by the participant's own actions or inactions, those actions or inactions of others participating in the event, the conditions of which the event takes place, or the negligence of the "releases" named are at the camper's own risk.

Participation gives THE ARK Christian Ministries permission to use participant's image in publicity materials (photos, videos, quotes). I understand that some camp activities may take the participants off the premises of THE ARK Christian Ministries.

It is the intention of the participant and participant's legal guardian by signing this agreement to exempt and relieve THE ARK Christian Ministries and its officers, agents, servants, and employees, other participants, sponsors, advertisers, and if applicable owners or lessors of premises on which the activity takes place, from liability for illness, personal injury, property damage, or wrongful death of the participant caused by any act of negligence. The undersigned participant and guardian agrees that in the event any claim for illness, personal injury, property damage, wrongful death, or otherwise, caused by any act of negligence will indemnify and hold harmless THE ARK Christian Ministries and its officers, agents, servants, and employees, other participants, sponsors, advertisers and if applicable, owners or lessors of premises on which the activity takes place.

### **I understand and agree to the following (initial all):**

\_\_\_\_\_ To bring 1-2 facial coverings with me

\_\_\_\_\_ To take my temperature **before** arriving at THE ARK. Please take a picture of the temperature on the thermometer.

\_\_\_\_\_ I will not come to THE ARK if my temperature is 100 degrees Fahrenheit or above. Temperature must be taken prior to taking any medication.

\_\_\_\_\_ I understand that if I do not follow THE ARK Protocols for COVID-19 I could be sent home without a refund.

Participant & Guardian Information:

I further certify that my date of birth is \_\_\_\_\_ (MM/DD/YYYY), that my present age is \_\_\_\_\_, that I am therefore of lawful age (18 years or older) and otherwise legally competent to sign this agreement, and that I have legal capacity to act as the parent/guardian of the named minor. I further understand that the terms of this agreement are legally binding and certify that I am signing this agreement, after having carefully read it, of my own free will.

\_\_\_\_\_  
Name (Print Clearly)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature  
(Parent/Guardian Signature required for those under 18)

\_\_\_\_\_  
Parent/Guardian Name (Print Clearly)