



**Horizon Christian Fellowship Mega Sports Camp
Waiver and Release of Liability**

I, _____ (name) give my permission for the Horizon Christian Fellowship Church, partners and event staff to treat me (or my child if a minor) to the best of their knowledge in the event of an emergency. By signing below, I understand the risks involved in physical activity and do not hold Horizon Christian Fellowship, the Church of the Nazarene, nor any of its staff, volunteers, or partners liable in the event of accident or injury.

Parent/Legal Guardian Signature Date

Participant's Name Parent's Name

In the event of an emergency please notify:

_____ at _____
(name) (phone number)

Relationship: _____.