



Mt. Auburn United Methodist Church Release of Liability Form

I, the undersigned participant, or the parent or guardian of the participant (under 18), in activities of Mt. Auburn United Methodist Church, at 3100 W. Stones Crossing Rd. Greenwood, Indiana, do hereby release and discharge Mt. Auburn United Methodist Church and its representatives and staff from all liability of any kind and character upon any injury suffered (including death) while participating in the activities of Mt. Auburn United Methodist Church. This release remains in effect until written notice revoking this release is received.

Participant Name (please print): _____

Legal Guardian (if under 18, please print): _____

Signature of Participant/ Legal Guardian: _____

Date ___/___/_____

Phone Number: _____

Emergency Contact:

Name: _____

Phone Number (Home): _____

Phone Number (Cell): _____

Optional Information: Please list any known allergies or medical conditions: _____