



RELEASE OF LIABILITY

- Attention: Every person engaging in transportation or conveyance of any kind using the services or being transported by a representative of MISSION AIR CARE must sign this waiver of all responsibility while using these services.

I, _____, do myself, or on the behalf of my children (*minors only*) listed below, agree to hold the above parties mentioned harmless from any liability that may arise from any form of transportation provided or any subsequent accident or misfortune. I understand that any conveyance, whether by air, land, or sea, inherently poses certain risks, and I hereby waive on behalf of myself and the above named person, any liability of the above named parties, any of its agents or representatives arising out of such activity. Additionally, by signing, I affirm that the above mentioned parties ***WILL NOT*** be held responsible for damages, injury, severe injury, or death as a result of such transportation. I further understand that if I want to be covered by insurance for any specific activity in which I engage, it is my personal responsibility to obtain that insurance.

❖ ***Please Note: We Cannot Act On Your Request Until This Release of Liability Is Completed And Returned.***

Name of Church/Ministry _____

Your Address _____ City _____ State _____ Zip _____

Minor: _____ DOB: _____

Minor: _____ DOB: _____

Minor: _____ DOB: _____

Minor: _____ DOB: _____

Minor: _____ DOB: _____

Minor: _____ DOB: _____

Minor: _____ DOB: _____

Minor: _____ DOB: _____

(SIGN) _____ (DATE) _____

- This waiver must be submitted by the responsible party, either in person to a MISSION AIR CARE representative, or mailed to the address below.

MISSION AIR CARE
 200 Airport Rd
 Washington, NC 28527
 e-mail: info@missionaircare.org