

FCA Middle and High School Electives

Hold Harmless Agreement / Release of Liability Form

In exchange for participation in electives organized by Family Christian Academy, and/or use of the property, facilities, and services of Family Christian Academy, I agree for myself and my child(ren), to the following:

- I assume full responsibility for personal injury to myself and/or my child(ren), and further release and discharge, Family Christian Academy and/or Family Church of Port Charlotte, FL. For loss or damage arising out of my or my family's use of or presence upon the facilities of Family Christian Academy or Family Church of Port Charlotte, FL, whether caused by the fault of myself, my family, FCA, or other third parties.
- 2. I agree to obey all posted rules, warnings, and school rules and further agree to follow any oral instructions or directions given by the teachers, staff, or other representatives of Family Christian Academy.
- 3. I agree to indemnify and defend FCA against all claims, causes of action, damages, judgments, costs or expenses, including legal fees, other litigation costs, which in any way may arise from my, or my family's use of or presence upon the facilities of FCA or Family Church of Port Charlotte, FL.
- 4. I agree to pay for all damages to the facilities of FCA or Family Church of Port Charlotte, FL, caused by me or my family's negligent, reckless, or willful actions.
- 5. Any legal or equitable claim that may arise from participation in the above shall be resolved under law.
- 6. I further acknowledge that any photography or videos taken of any part of or all of the FCA electives will be the sole ownership of FCA and Family Church of Port Charlotte, FL, and will not print or post any photographs without the permission of Family Christian Academy or Family Church of Port Charlotte, FL.
- 7. I also agree to all of the above statements when traveling to 'away' activities and allow FCA and their representatives to have full charge over my child(ren) in such instances.

Participant's Name (print)	Participant's Signature
Parent/Guardian Name (print)	
 Date	