FOREIGN TRAVEL RELEASE

This document must be read and signed by the individual participating in the Vision Trip. If you are under 18, both parents or legal guardian(s) must sign this document and have it notarized.

In consideration of being permitted and authorized by All God's Children International (AGCI) to participate in any manner of travel to a foreign country while on a Vision Trip, and to participate in any organizational activities incidental to such travel, I agree to the following provisions of this release:

- 1. AGCI is hereby released from any and all liability, claims or demands for damages which the undersigned presently has or may have in the future, arising out of any personal injury, emotional distress, bodily injury, sickness, death, loss of or damage to property, or any other loss, costs or expenses incurred by the undersigned, during the course of, as the result of or in any way connected with the undersigned's foreign travel as described in this release, whether such damages, costs or expenses may arise out of the negligence or carelessness of AGCI or otherwise. This release specifically extends, without limitation, to claims based on allegations of failure to warn of circumstances or conditions within any foreign country, or failure to warn of any U.S. State Department travel advisory or travel warning.
- 2. The undersigned acknowledges and is aware that: (a) all travel, whether in the U.S. or a foreign country, involves risks of crime and accident; (b) foreign travel as described in this release may involve additional risks and hardships, foreseen and unforeseen, including, but not limited to, risks of exposure to illness or disease, unsanitary or unsafe food and water, inadequate or nonexistent medical and dental services and political instability; (c) foreign travel is entirely voluntary. With this knowledge, the undersigned hereby agrees to assume all risks in connection with the foreign travel described in this release, whether such risks are foreseen or unforeseen.
- 3. The undersigned agrees that the presence or participation of an AGCI employee, agent, facilitator, guide or travel escort during any portion of foreign travel does not in any way constitute a guarantee, promise or assumption of responsibility on the part of AGCI for the undersigned's health or safety. Nevertheless, the undersigned acknowledges that he or she has been strongly advised to remain at all relevant times with the Vision Trip travel group and to follow and heed the instructions and warnings of the Vision Trip team leader. This release extends to any consequence that may befall the undersigned as a result of leaving or separating from the AGCI travel group or from failing to heed the advice or warnings of the team leader.
- 4. The undersigned has had a recent medical examination, or otherwise has good reason to believe that he or she is physically fit and capable of participating in foreign travel, and assumes the responsibility of fitness and capability to do so.
- 5. The undersigned consents to medical and dental treatment by AGCI, or by such others as AGCI may designate, if the undersigned is in need of such treatment and is unable to consent to such treatment due to physical, mental or other incapacities while participating in foreign travel as described in this release. The undersigned agrees to pay all charges for such treatment and to indemnify and hold AGCI harmless there from. The undersigned further agrees that the rendering of any medical or other services to the undersigned by, or at the instance of, AGCI or any the persons or entities described in paragraph 3, above, does not constitute a waiver or an admission of liability to provide or to continue to provide any such services.

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as is permitted by law in the state of Washington, and that if any portion of it is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. The undersigned agrees that this document shall be construed in accordance with Washington state law, without regard for conflicts of law principles. I have carefully read this release and fully understand its contents. I am aware that this is a release of liability and a contract between myself and AGCI. I understand that by signing this document I am giving up substantial rights, including my right to bring legal action against AGCI or any of its representatives. I sign this document voluntarily, of my free will. In doing so, I am not relying on any representations, statements or inducements other than those that appear in writing in this release. PRINTED NAME OF PARTICIPANT SIGNATURE OF PARTICIPANT DATE SIGNATURE OF GUARDIANS (if volunteer is less than 18 years of age, all legal guardians must sign and notarize) DATE IN CASE OF EMERGENCY, PLEASE CONTACT NAME RELATIONSHIP **ADDRESS** CITY/STATE/ZIP

CELL PHONE

HOME PHONE

6. The undersigned expressly agrees that this release, waiver and indemnity agreement is intended to be as broad and inclusive