

Release of Liability Form



APPLICANT TO FILL OUT THEIR DETAILS BELOW

This document acknowledges the fact that I have been informed of the following:

1. That the mission field may contain areas involved in military action, and as a result, my being a missionary in foreign lands subjects me to possible risk of bodily harm or in an extreme case, death.
2. That most third world countries are developing countries and therefore do not have all the sanitary protections afforded in the west. Because of this there may be a risk that I may be exposed to these unknown dangers which could lead to bodily harm or in an extreme case, death.
3. That the foreign countries I may be travelling and ministering in may contain other dangers and risks unknown to me and NKandBeyond Missions and may subject me to these unknown dangers and risks which could lead to bodily harm or in the extreme, death.

Understanding the above risks, and having been fully informed of the same I hereby willingly, knowingly, and with intent do hereby assume said risks and do hereby release NKandBeyond Missions its officers, agents and employees or any person acting in its stead from any and all liability for any and all harm which may come to me in transit and/or while staying in any foreign country. Therefore, I acknowledge that I am not an employee of NKandBeyond Missions.

In case of emergency contact for consent in medical or other emergency matters:

Name: _____
Address: _____

Relationship? _____ Phone: _____

Insurance Company: _____

Policy No: _____ Contact No _____

Parent/Guardian (under 18 years old only) : _____

Printed Name: _____

Applicant Signature: _____ Date: _____