



CONSENT AND RELEASE FOR INTERNATIONAL TRAVEL PROGRAM

My minor child _____, will be participating in an international YLX Travel LLC and Young Life activity _____.
(name of participant) (destination)

This Consent/Release is valid for travel from on or about _____(month/year) and returning on or about _____(month/year).

My minor child _____(name) has my/our permission and consent to travel with the YLX Travel and/or Young Life sponsored group and Trip leader. I/we authorize the Trip Leader to make arrangements and determinations for all modes of travel, including itinerary changes as necessary during this trip.

Name of Participant _____ Birthdate _____ Age _____ Gender _____
(Last, First, Middle)

Home Contact _____
(Name of Spouse/Parent/Guardian and Phone Number)

Home Contact Address _____

Emergency Backup Contact Info (Different from above) _____

Any allergies or other medical needs? _____

Limits to activities _____

Name of Physician _____ Physician's Phone _____

Medical Insurance Company _____ Policy Number _____

For all YL Expedition trips, please answer the following questions:

- Have you been diagnosed with a medical condition or disease of the blood, respiratory, metabolic, or other system, such as sickle cell disease, COPD/emphysema, etc. that could limit participation at altitudes above 7,000? Yes No If yes,
 - Please explain the condition and expected treatments: _____
 - Young Life recommends that you consult with your physician before finalizing your Expedition trip.
- Do you have any additional medical conditions, including those above in #1 which could limit participation in an active camp program regardless of the elevation? Yes No
If yes, please explain the condition and expected treatments: _____
- The applicant is authorized to carry an inhaler, epi pen and other emergency medications with them at all times? Yes No

AUTHORIZATION FOR TREATMENT AND VERIFICATION OF FITNESS FOR PARTICIPATION:

- I hereby authorize Young Life and/or YLX Travel LLC to make emergency medical decisions on my behalf, in the event that I require emergency medical treatment during the activity.
- I hereby give permission to the medical personnel selected by Young Life and/or YLX Travel LLC to secure and administer treatment and to maintain and/or release any medical records necessary for insurance purposes as outlined under the HIPAA regulation, and to provide or arrange necessary related transportation.
- I hereby verify that I am in good health and capable of participating in strenuous activities and, when necessary, I am responsible to tailor my activities to those within the bounds of my physical health.
- I hereby verify that Young Life and/or YLX Travel LLC cannot guarantee to meet any of my dietary restrictions or preferences and I am responsible for my dietary needs as I participate in the activity.
- I hereby recognize that Young Life and/or YLX Travel LLC includes travel protection through Travelex when traveling with YL Expeditions providing emergency medical and dental coverage of \$50,000, emergency evacuation and repatriation up to \$250,000; \$1,000 trip interruption; \$1,000 trip delay; \$1,500 in baggage and personal effects; \$250 baggage delay.
- I hereby recognize that any medical treatment including medical transportation such as ambulance (land, air, or water), dental or medical fees and any other related cost provided to me while traveling to and from and while attending a Young Life and/or YLX Travel LLC activity will be paid for by my medical insurance company or YLX Travel LLC and I guarantee payment for services not paid by insurance.
Young Life provides SECONDARY insurance for accidents in the amount of \$20,000 medical, \$4,000 dental. Claims covered under Young Life's SECONDARY insurance for an accident less than \$250 may be covered in full by Young Life.
However, Young Life does not assume any responsibility or liability for the payment of such hospital, doctor, ambulance, dental or other medical fees or any other related costs which may be incurred.

CONSENT AND RELEASE FOR INTERNATIONAL TRAVEL PROGRAM

I, the undersigned (herein, "YOU"), wish to participate in a short-term international mission trip (herein the "Activity") coordinated by YLX Travel LLC, a Colorado Limited Liability Company, and Young Life, a Texas non-profit organization (herein the "Organizations").

The Organizations are providing assistance to YOU in arranging this trip. YOU agree that YOU will submit to the leadership and direction of both the Organizations' staff responsible for coordinating the Activity, and the leadership of any Local Organization which YOU may serve with as a volunteer on the Activity.

The Organizations and YOU agree that the Activity poses risks and dangers including the following specific risks that might occur during or to YOU while traveling and participating in the Activity:

- Any risks inherent in international travel and living and surviving in an international environment;
- encountering or experiencing sickness, illness, disease, accident, injury or damage to your person or your personal property, or even death;
- exposure to disease, infection, and sickness, lack of access to medical care, treatment or medicines, exposure to emotionally disturbing conditions or persons;
- exposure to or living amidst substandard, extreme, or harsh conditions including but not limited to: polluted and toxic environmental conditions, lack of or inconsistent power and public services, contaminated water, lack of potable water, lack of air conditioning, electricity, running water or sewage and supplies, harsh sleeping conditions such as sleeping on the floor, in tents or even outside. This specific risk is especially true in situations when the Activity involves a work project or humanitarian aid project;
- crime, political instability, rioting, looting or subsequent disasters in the Activity area, loss or destruction of your personal property; kidnapping, terrorist threats, event, or activities; and
- Similar and dissimilar risks (herein the "Risks").

FOR AND IN CONSIDERATION OF THE ORGANIZATIONS ASSISTING YOU IN PARTICIPATING IN THE ACTIVITY, AND OTHER GOOD AND VALUABLE CONSIDERATION THE RECEIPT AND SUFFICIENCY OF WHICH IS HEREBY ACKNOWLEDGED, YOU FOR YOURSELF, YOUR REPRESENTATIVES, ASSIGNS, HEIRS, DISTRIBUTEES, GUARDIANS AND NEXT OF KIN (HEREIN THE "RELEASORS"), HEREBY IRREVOCABLY AND UNCONDITIONALLY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE THE ORGANIZATIONS, AND EACH OF THEIR AFFILIATES, SUBSIDIARIES, DIVISIONS, MEMBERS, DIRECTORS, OFFICERS, EMPLOYEES AND AGENTS (HEREIN THE "RELEASEES"), FOR AND FROM ALL CLAIMS OF ANY NATURE NOW OR HEREAFTER EXISTING WHETHER KNOWN OR UNKNOWN, INCLUDING BUT NOT LIMITED TO, ALL LIABILITY TO THE RELEASORS, ON ACCOUNT OF PHYSICAL INJURY, ILLNESS OR TRAUMA, PSYCHOLOGICAL INJURY, ILLNESS OR TRAUMA TO THE UNDERSIGNED OR DEATH TO THE UNDERSIGNED OR INJURY TO THE PROPERTY OF THE UNDERSIGNED, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERWISE, WHILE THE UNDERSIGNED IS PARTICIPATING IN THE ACTIVITY. FURTHER YOU AGREE TO INDEMNIFY AND HOLD HARMLESS THE RELEASEES FROM ANY AND ALL CLAIMS, LOSSES, DAMAGE, INJURIES, DAMAGE TO PROPERTY OR OTHER COSTS AND EXPENSES ARISING FROM OR CAUSED BY YOU, IN WHOLE OR IN PART, DURING YOUR TRAVEL TO AND FROM AND PARTICIPATION IN THE ACTIVITY.

YOU ARE FULLY AWARE OF THE RISKS AND OTHER HAZARDS INHERENT IN THE ACTIVITY, AND YOU WILLINGLY AND VOLUNTARILY ASSUME THE RISKS AND ALL OTHER RISKS OF LOSS, DAMAGE, OR INJURY THAT MAY BY SUSTAINED BY YOU WHILE PARTICIPATING IN THE ACTIVITY. YOU AGREE THAT THE TERMS HEREOF AND YOUR SIGNATURE ON THIS DOCUMENT SHALL SERVE AS A RELEASE AND ASSUMPTION OF RISK AND SHALL BIND YOU HEIRS, REPRESENTATIVE, EXECUTORS AND ADMINISTRATORS, SUCCESSORS AND ASSIGNEES AND FOR ALL MEMBERS OF YOUR FAMILY, INCLUDING MINORS ACCOMPANYING YOU.

YOU further agrees that YOU bear the sole responsibility for any and all travel expenses which YOU incur in the event that the Organizations' staff find it necessary to send YOU home prior to the scheduled departure date, whether for health or physical limitations or inappropriate or immoral behavior, and whether required during your participation in the Activity or not.

YOU warrant that YOU have fully read and understand this Consent and Liability Release Agreement and voluntarily sign the same, and that no oral representations, statements or inducements apart from the foregoing written agreement have been made to YOU.

PHOTO RELEASE:

Furthermore, I hereby grant YLX Travel LLC and Young Life permission to use, reproduce, and/or distribute photographs, films, videos and sound recordings of me without compensation or approval, for use in materials created for purposes of promoting the activities of YLX Travel LLC and Young Life, including display on the Internet.

Trip Participant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

To be witnessed by a licensed Notary:

The foregoing Consent/Release was signed before me by _____ (Parent/Guardian),

on this _____ day of _____, 20_____.

State of _____ County of _____.

Signed: _____ Notary Stamp:

(Notary)