

PIEDMONT-OKEFENOKEE BAPTIST ASSOCIATION, Inc.
2104 Alice Street
Waycross, GA 31516
912-285-8161

ASSUMPTION OF RISK AGREEMENT

I, _____
(Applicant's Legal Name)

agree as follows on behalf of the **Piedmont-Okefenokee Baptist Association, Inc.** and their affiliated network of missionaries/agencies:

(1)

I am aware of the emotional and physical hazards and risks to my person and property associated with the overseas medical/evangelism and/or other missionary activities for which I am applying. Such hazards and risks include, but are not limited to, death or injury by willful acts, accidents, disease, terrorist acts, weather conditions, improperly prepared or contaminated food, and inadequate medical facilities and medical supplies. I volunteer my services on behalf of the Piedmont-Okefenokee Baptist Association, Inc. and their affiliated network of missionaries or agencies despite such hazards and risks both known and unknown. I assume the risks of death, injury, and damage associated with such risks.

(2)

I attest and verify that I am physically fit and have no medical conditions that would prevent me from performing the volunteer services for which I am applying.

(3)

*****I waive any and all claims for incurred damages which I may have against the Piedmont-Okefenokee Baptist Association, Inc. and/or the affiliated network of missionaries or agencies related to this mission trip now or at any future time.*****

(4)

Travel and work is in an underdeveloped nation. Therefore, I understand it may be difficult or impossible for the Piedmont-Okefenokee Baptist Association, Inc. or its representative network of missionaries/agencies to guarantee or meet special/safe dietary requirements.

Oaxaca Province, Mexico

Mission Site

Departure Date

Signature of Volunteer Applicant (*Signature & Date Are Required*)

Date

Signature of Parent or Legal Guardian (if applicant is a under 18 years old)

Date

Notary Public – Signature/Seal

My Commission Expires On: _____

Sworn to and Signed Before me on _____, 20_____