

**Northern California Coptic Orthodox Churches
2009 Youth Convention**

Consent & Release Form

Event: 2009 Youth Convention

Date: August 7th – 9th, 2009

Place: Thompson Hall – UC Davis Campus, Davis, CA

Name: _____

Date of Birth: _____

CLERGY ENDORSEMENT

I give permission to the aforementioned registrant to attend the 2009 Northern California Coptic Youth Convention.

Clergy Signature

Date

LIABILITY TREATMENT

As a condition of attending the convention, I do hereby release the Coptic Orthodox Church, and all its affiliated parishes and organizations, as well as its servants, agents and employees, and UC Davis, from any and all claims, demands, actions, or causes of action due to death, injury, or illness, in any way, arising from the above described activity, including, but not limited to transportation to and from the event. I further agree that the financial responsibility for securing care, in case of injury resulting from participation in the convention, is a matter between myself and my health care provider, and the Coptic Orthodox Church, or the Youth Convention cannot pay health care providers for treatment of any injuries. It is further agreed, that I will assume all legal responsibility for my personal safety and actions while participating on the convention and while traveling to and from the convention.

Signature (Legal Guardian if under 18 years of age)

Signed this _____ day of _____ 2009