Dioceses of New York and Charleston & the Mid-Atlantic Parish Life Conference

ACCORDING TO THE PARTY OF THE P

Hosted By: St. Mary Church (Hunt Valley, MD)

Antiochian Village Heritage & Conference Center ~ June 26 – June 30, 2024

Off-Site Event Form – Coal Tubin (Teens and Above Only)

Please Use One Form Per Attendee Per Off-Site Event

All Attendees at any Off-Site Events are REQUIRED to be Registered for the 2024 Parish Life Conference; pay any associated costs for the Event, if any; and, complete and sign this Off-Site Event Form. In the event that the Attendee is below the age of 18, this Form must also be signed by the Parent or Legal Guardians of the minor.

Event Date: <u>Saturday June 29, 2024</u> Street, Johnstown, PA 15905)	<u>4 1:00-4:30 F</u>	PM_ Event Name: <u>Coal Tu</u>	ubin (100 Station
Registrant Name:		Birth Date:	Age:
The undersigned Attendee, desires, of methat the insurance that protects attended Attendees at any Off-Site Event. According and hold harmless St. Mary A Orthodox Christian Archdiocese of North directors, employees, agents, members, and all liabilities, responsibilities, costs, error source of such occurrences and regar By signing this Form, I agree to follow all this Event, ensuring proper order and safe	ees at the Horordingly, and antiochian Orthon America, incomparing affiliates, pariexpenses, incided after the of the instruction of the instructi	regardless how I travel to this regardless how I travel to this nodox Church Hunt Valley, Maluding but not limited to their shioners, guarantors and/or as dents, injuries, and occurrence f-site location of such occurrence stions and directions of the per	s not extend to nor cover s Off-Site Event, I hereby aryland and the Antiochian respective clergy, officers ssignees thereof, from any s regardless of the causes nce(s).
Attendee's Name (Print)	Attendee's Signature (Regardless of Age)		Date
Parent/Legal Guardian Name (Print)	Parent/Legal Guardian Signature		Date
Cell Phone of Responsible Party		Email Address of Responsible Party	
Emergency Contact Name	Emergency Contact Phone		e

COAL TUBIN' PA, LLC RELEASE AND WAIVER AGREEMENT

Date:	Email Address:					
Name:	Date of Birth:					
Address:	Phone:					
	City	State	Zip			
	INFOR	RMATION REG	ARDING MINORS			
Please Print	Last Name		First Name	Birth Date		
Minor #1						
Minor #2 Minor #3	5 to 10 8 0 5 7 7 7 7 1 1 1 1 1 2 1 4 1 1 1 1 1 1 1 1 1 1 1 1		* 1 ***			
Minor #4						
and other risks involve utilized in kayaking, raneck, and back; or oth bones, and other injury other harm. Possible barely submerged log independent contracted including misjudging the water, upon rocks but not limited to frost including but not limited to frost including but not limited. Attack by or encounter understand the description of the water, upon a limited to the water, upon rocks but not limited to frost including but not limited. Attack by or encounter understand the description of the water, upon a limited to frost including but not limited. (2) to accept all risks (3) to follow all rules, (4) to waive my right the liability for any such charmless, and reimbut other than the submitted that the submitted in the water limited that the submitted that th	ed in river tubing/kayaking/rafting. Some of afting, river tubing, swimming, and related her bodily injuries that may result in permaries including death. Exposure to water he equipment failure and/or malfunction of miss and stumps and other hazards that are person or representatives of Coal Tubin Penterrain, rapids, weather, trails, or route locin, capsizing, sinking, or other hazards that injurietion of water into my body orifices, red to rock fall, inclement weather, rising we want insects and/or animals. Accidents of cription of these risks is not complete a confirment of the complete and of river tubing/kayaking/rafting, whether splinistructions, and directions provided by Coal or bring any claims against Coal Tubin' that laims. This waiver and release includes of	of these risks inclu- activities is signif- anent disability an ydraulics, hidden y own or others' e not visible. My own nsylvania, LLC. ation. Hazards rel t may result in we marine life forms, arn, hypothermia, ar arters, thunder an or illness occurring and that unknown pecifically listed in oal Tubin'. If I do at arise out of or re- laims based upon	ide, but are not limited to, risk icant including the potential for death. Kayaking, rafting, risor obvious obstructions, and/opuipment. Running into objet in negligence and/or the negligence and/or the negligence and/or afting, rivertness, injury, exposure to elerand/or drowning. Cold weather and/or drowning. Cold weather and dehydration. Dangers as a dightning, severe and/or varig in remote places where ther nor unanticipated risks mand paragraph (1) above or not.	r tubing, and swimming which include but are ments, hypothermia, impact of the body upon er and heat related injuries and illness including sociated with exposure to natural elements ited wind, temperature or weather conditions. The are no available medical facilities. It may result in injury, illness, or death. Ind., with no refund of the amount paid by me. Itaniforafting, and to release Coal Tubin' from		
(5) that all disputes an of Cambria County, P		of the tubing facilit	ies at Coal Tubin' shall be liti	gated exclusively in the Court of Common Plea		
(6) I grant Coal Tubir waive any right to be Coal Tubin's use of m	compensated for the use of my image and	video images of m d release Coal Tu	e for the purpose of marketin bin' from liability for any claim	ng, publicizing and promoting the company. I ns, where such claims arise out of or relate to		
Adults: I understand	this Agreement and enter into it voluntarily		Table 1997			
Name:	(signature of adult participant)	¥	Date:			
	(signature of adult participant)	*				
paragraphs four a hold Coal Tubin' h	ns, or responsible adults: I agree: nd five above apply to any claim by armless for all losses (including atto the minor's participation.	me related to t	he minor's participation;	and, (3) to indemnify and		
Name:	41		Date:	:		
	(signature parent, guardian, or	responsible a	dult)			
	ne Number:		* 2 = 2 = 5			