



## General Liability Waiver

I, my children, and any of our representatives (hereafter referred to as "family") do hereby acknowledge that participation in Beacon Hill Homeschool Community (hereafter referred to as BHHC) and utilization of the grounds and facilities at City Church could expose us to possible risk of personal injury. In consideration of my family being permitted to participate in BHHC, I do hereby release and agree to hold harmless BHHC and City Church, and its and their respective officers, members, employees, and volunteers from any and all liability for claims, damages, or injury, including costs and attorney fees, to my family or any personal property during the time of our attendance at BHHC activities, whether or not such damages were sustained in connection to any BHHC activities.

I assume full responsibility for my family's behavior, for assuring their supervision during BHHC activities, and for any damage or injury caused by my family's actions. I agree that my family shall not now, or at any time in the future, directly or indirectly, initiate or prosecute any action, suit, or other legal proceeding against either BHHC or City Church arising out of, relating to, or in connection with BHHC. I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by the law of the State of Mississippi and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto and the terms of this release are contractual and not a mere recital. We, the parent(s) or legal guardian of (list all children participating)

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hereby give permission to participate in the classes and activities of BHHC. I further acknowledge and certify that I am the legal guardian or parent of the minors listed above.

All parents or legal guardians participating must sign before the first day your family attends.

Parent/Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

Parent/Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

Printed Names \_\_\_\_\_