RELEASE AND HOLD HARMLESS AGREEMENT
AND CONDITIONS OF PARTICIPATION

This is a legal document, which includes a release of liability. Read it carefully before signing.

In consideration of my being accepted by AMOR Projects for participation in a mission trip to Peru, I make the representations and undertakings set out below:

- I understand that international travel involves danger and risk. I acknowledge that the dangers and risks include, but are not limited to, the hazards of travel; sickness or injury in areas where medical assistance may be primitive or inadequate, unavailable or not readily available, and/or where rapid evacuation is not available; or where there is exposure to crime, to civil unrest and to forces of nature or other dangers.
- I attest and certify that I am physically fit and have no medical conditions that would prevent me from performing my assigned duties which may include long hikes, heat, limited and infrequent meals. I am aware of the disease risks associated with foreign travel and I accept these risks.
- I understand that while traveling or residing in Peru, I will be subject to the laws, rules, and law enforcement procedures of Peru. Any violation of such laws could result in my being detained or otherwise involved with local law enforcement authorities and beyond the control of AMOR Projects supervision.
- I understand that if my conduct during or outside of required program activities presents a hazard to other people on the trip, the program administrators reserve the right to take appropriate action to protect the mission program and its administrators and participants from further disruption of the activities or risks of physical injury, including action to terminate the right to participate in the program.
- I understand that AMOR Projects does not or may not carry any insurance relative to the trip or for injuries to the student missionary. I represent that the student missionary has insurance either through Advent Risk Management or my own insurance carrier.
- If any emergency medical procedures or treatment are required during the mission trip, I consent to the trip supervisor(s) taking, arranging for, and consenting to the procedures or treatment in supervisor's discretion. I will pay the costs of any such medical procedures or treatment.

IN CONSIDERATION OF AND AS PART PAYMENT FOR THE OPPORTUNITY TO PARTICIPATE IN THIS MISSION PROGRAM, I HAVE AND DO HEREBY RELEASE AND WILL HOLD HARMLESS AMOR PROJECTS AND ALL THEIR OFFICERS, EMPLOYEES AND AGENTS, FROM ANY AND ALL LIABILITY, ACTIONS, CAUSES OF ACTIONS, DEBTS, CLAIMS AND DEMANDS OF EVERY KIND AND NATURE WHATSOEVER, AND SPECIFICALLY INCLUDING ANY CLAIM FOR NEGLIGENCE OR NEGLIGENT ACTS, WHICH I NOW HAVE OR WHICH MAY ARISE OUT OF OR IN CONNECTION WITH MY TRIP OR PARTICIPATION IN THIS ACTIVITY. THE TERMS HEREOF SHALL SERVE AS A RELEASE, INDEMNIFICATION, AND ASSUMPTION OF RISK FOR MY HEIRS, EXECUTORS, AND ADMINISTRATORS AND FOR ALL MEMBERS OF MY FAMILY, INCLUDING ANY MINORS ACCOMPANYING ME.

Prior to signing this document, I have had an adequate opportunity to read and understand it, have had an opportunity to ask questions about it, and any questions I have had have been answered to my satisfaction.

Signature of Applicant	Printed Name of Applicant	Date

Parent or Guardian (To be filled in if participant is under 18 years of age):
I give my permission as a parent or guardian of the listed team member to serve with AMOR Projects on the trip stated above. My child is accompanying a fellow family member or guardian and is under his/her care and supervision. I have read this release form in its entirety and agree to all of its conditions on behalf of this minor.

Signature of Parent or Guardian	Printed Name of Parent or Guardian	Date