RELE	ASE AND INDEMNIFICATION A	GREEMENT for Visitors to AFC I	roperty
THIS AGREEMENT is dated APOSTOLATE FOR FAMILY CO	and is entered into NSECRATION, INC. (AFC), a not-fo	by and betweenor-profit corporation.	(Participant) and the
other programs or events to be held members; And whereas, this agreer programs or events reflects the fina programs or events is voluntary an	as and families and members of the A at the AFC's property in Bloomingdoment between the AFC and the particil intentions of the parties, that particil d in no way creates any employment be following terms and conditions for property:	ale, OH is a gratuitous and voluntary ipants of the Holy Family Fests, Totupation in the Holy Family Fests, Totubetween the AFC and the members/	act of these persons and families and s Tuus Family Conferences, or othe s Tuus Family Conferences, or othe participants; The participants and th
pect remuneration for any 2. Any work performed by F	Participant and any minor children as v	volunteers becomes the sole property	of the AFC;
 Participant agrees and do mands, damages, costs, lo including minor children bers arising out of our at events whether or not it be 	nties or assurances as to the facilities of the ses hereby hold blameless, exonerate, coss of services or expenses or compete to which Participant is legal Parent or tendance and/or participation in the Fe caused by the negligence of the AFC to whilten will follow all of the printers.	release, and indemnify the AFC from the release, and indemnify the AFC from the release of the r	n any and all liability or claims, de nage, loss or injury either to person ay have against the AFC or its mem y Conferences, or other programs o ise;
5. Participant and any minor at registration and check-	children will follow all of the printed in.	or posted rules and regulations and a	iny materials provided to participant
children to engage in any specific re injuries, illness, or financial liabilit AFC religious gathering. I understa Jefferson County (Ohio) Health Dedren will abide by posted direction AFC facility as they are designed to pate at an AFC event that I have ce CDC guidance, and will do so even	I am apprised of the COVID-19 paneligious gathering, including attendancy resulting from COVID-19 that may not that the AFC will make every effor partment guidelines designed to slow as and those communicated to me at continuous to a strengthen the safety of AFC religious rifified to AFC staff that myself and many day we remain on AFC property.	ce at an AFC activity. Therefore, I do r have been contracted by myself or ret to provide a clean and safe environs the spread of the COVID-19 virus. I heck-in and during other announcements gatherings for all participants. I untry minor children have self-assessed I further understand that I will information in the self-assessed of the self-a	not hold the AFC responsible for any minor children while attending and ment by abiding by State of Ohio and agree that myself and my minor chilents before and during my stay at the derstand that to be allowed to particifor COVID-19 before traveling using
son who refuses to comply with this	n Property: We are aware that the As release, any posted rules and regulate individual who is removed for refusion	tions, or any materials provided to par	ticipants at registration and check-in
	signing this release, the Parent(s) or C isted children through e-mail, texting, d effective event interactions.		
Please list all family members unde	r 18 visiting AFC property to whom y	ou are a Parent or Guardian:	
	1		
I have read, understand, and a	agree to the terms of this Release	e and Indemnification Agreemer	ıt:
Signature	Name (p	please print)	Date

City: _____ Zip: _____

Phone: Email:

Child Release of Liability Form

Please be advised that I	desia	nate		
	3	(First & last nan	ne of child)	(Date of Birth)
to be in the care of			durir	ng the period of
		(Full Name of Adult)		.g and period or
	to	Date (month, day, year)	, at which t	ime they will be
Date (month, day, year)		Date (month, day, year)	•	,
attending an event at Ca	tholic	Familyland in Blooming	gdale, Ohio	
		will make any	medical or	other importan
(Designated Adult's Nam	e)			
decisions concerning		(Child's Name)		during this time.
I hereby release and inde	emnify	y all the staff and volun	teers at Th	e Apostolate
for Family Consecration's	s Cath	holic Familyland from a	ny legal res	sponsibility,
both now and in the futur	e, for	my child's stay there.		
(Signature of Parent or Legal Guardia	an)	(Date)	(Relationship to child)	
(Complete Address)			(City)	(State) (Zip)
(Phone Number)	_			
(Signature of Adult Being Designated))	(Date)		

Please complete and return this form no later than 2 weeks prior to the scheduled event. Thank you and God bless.





3375 County Road 36 Bloomingdale, OH 43910 Phone: 740-567-7700 Fax: 740-567-7725