



God Op Security/Behavioral Agreement and Liability Release Form

As a GO-Team participant on a God Op, I the undersigned, agree to the following terms:

I will conduct myself in a manner appropriate to the culture and situation. I will act in a manner that promotes a cohesiveness between GO-Team members. I will maintain a posture of servanthood. I will NOT take any action that could harm the success of the God Op, or have a negative impact on the missionary/organization my GO-Team is serving.

I agree to abide by any and all legal instruction given by the designated God Op GO-Team Leader. Such instructions will include, but may not be limited to the following:

1. Matters of safety, security, dress and conduct.
2. Matters regarding the taking of visual images or sound recordings or publications that may compromise security of the GO-Team and its mission, or that may be culturally offensive.
3. Matters regarding personal behavior that could be detrimental to the cohesiveness of the GO-Team, as well as to the success of the God Op mission.
4. Matters regarding the publication and syndication of photographic/motion picture images, stories, names, and events obtained as a result of your participation on this God Op to the extent tht such publication or syndication reflects negatively on the GO-Team and/or Hope Community Church, or may compromise the security of the God Op or missionary/organization being served.
5. Statements given to the media or any public entity.

I agree to share all photographic negatives, digital photo CD's, digital photo storage devices, video cassettes, or any other recording media made during this God Op with Hope Community Church representatives.

I give Hope Community Church permission to use my name in print and in reports on web sites and other electronic media, and to allow the use of recordings of my image and/or voice, and to document and publish events in which I was involved on a God Op.

In the event I violate any of the above, I acknowledge and agree I may be sent home from the God Op at my own cost and expense.

I, the undersigned, desire to participate in a project (herein referred to as the "Activity") known as a 303-GO God Op.

The undersigned acknowledges and agrees that the undersigned , as a member of a 303-GO God Op GO-Team is not going or acting as a representative or agent of Hope Community Church or any ministry thereof.

The undersigned agrees that the Activity poses risks including the following specific risks: sickness, crime, political instability, governmental opposition to project activities, as well as similar and dissimilar risks (herein the "Risks").

For and in consideration of Hope Community Church, Andover, Kansas assisting the participant in the Activity, and other good and valuable consideration the receipt and sufficiency of which is hereby acknowledged, the undersigned for himself/herself and his/her personal representatives, assigns, heirs, distributees, guardians and next of kin (herein the "Releasors"), herby irrevocably and unconditionally releases, waives, discharges and covenants not to sue Hope Community Church, Andover, Kansas and its ministries, affiliates, members, directors, officers, employees and agents (herein the "Releasees"), for and from all claims of any nature now or hereafter existing whether known or unknown, including but not limited to, all liability to the Releasors, on account of injury to the undersigned or death to the undersigned or injury to the property of the undersigned, whether caused by the negligence of Releasees or otherwise, while the undersigned is participating in a God Op.

The undersigned is fully aware of the Risks and other hazards inherent in the Activity, and voluntarily assumes the Risks and all other risks of loss, damage, or injury that may be sustained by the undersigned while participating in the Activity. The undersigned further agrees that he/she bears the sole responsibility for any and all medical expenses which he/she incurs while participating in the Activity, whether for injury or illness, and whether required as a result of the undersigned's participation in the Activity or not. The undersigned acknowledges Releasee are under no obligation to, and do not, provide medical insurance or reimbursement of any kind for the undersigned.

The undersigned warrants that he or she has fully read and understands this Liability Release Agreement and voluntarily signs the same, and that no oral representations, statements or inducements apart from the foregoing written agreement have been made to the undersigned.

BY MY SIGNATURE BELOW, I AM INDICATING THAT I HAVE READ, UNDERSTOOD AND AGREE TO ACT IN ACCORDANCE WITH ALL OF THE CONDITIONS EXPRESSED ABOVE.

APPLICANT: _____
Printed Name

Signature

DATE: _____

