

**MissionsNetwork International**  
**P.O. Box 827**  
**Lynden, WA. 98264**

**Release of Liability Form**

This form is to be filled out by all mission team members and returned to MissionsNetwork International 30 days prior to date of mission trip.

Travel into Mexico by its own nature offers an unfamiliar and unique environment and risks of injury to both persons and property are inherent. While risks are probably the same or less than anywhere else, there is always a certain risk. I understand that, by my participating in the ministry of MissionsNetwork Int'l. I am indicating my acceptance to these inherent risks.

I/we do hereby release MissionsNetwork International and staff members from any liability whatsoever arising out of any injury, damage, or loss which may be sustained by said person during the course of involvement with MissionsNetwork International.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of father

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of mother

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Legal Guardian (if applicable)

\_\_\_\_\_  
Date