



# Legal Release

## Liability Release

I \_\_\_\_\_, in consideration of the ministry that I am doing through VOICE Missions, do release VOICE Missions, my Taiwanese sponsor, and all other affiliated/parent ministries from all legal actions or claims which I may have. I recognize the potential for physical injury to which I may be exposed in the course of my ministry, and in exchange for the benefit of spiritual growth, emotional maturity, and mental challenge that is likely to result from this trip, do willfully and knowingly release VOICE Missions, its employees, and volunteer staff from any legal action or claim arising out of the unlikely event of an accident involving my physical injury or death.

## Medical Release

In consideration of the aforementioned benefits, I do voluntarily authorize VOICE Missions and any of their officers, employees, or volunteer staff responsible for my well-being to personally provide or make reasonable arrangements for my medical needs, including lifesaving procedures that appear to be reasonably necessary to preserve my life in case of an emergency. Due to the nature of the ministry in which I will be involved, I understand that my family may not be contacted

prior to the commencement of such medical treatment, but that they will be contacted as soon as is reasonably possible in the event of any such serious injury.

## Permissions

I, \_\_\_\_\_, give VOICE Missions permission to reproduce my likeness in their brochures, books, websites, and all print or electronic media and further allow VOICE Missions to sell or distribute any aforementioned materials containing my likeness in whatever way desired.

## Declaration

I further state that I have carefully read the foregoing release and willingly agree to the contents thereof. I declare that all the information contained herein is true, correct, and complete to the best of my knowledge. I fully understand the arrangements made for my care and willingly consent to VOICE Mission's provision for my health and welfare during the period of time that I am, under jurisdiction of VOICE Missions. I voluntarily and of my own free will sign my name to this release of liability and medical form.

**WITNESS my hand this \_\_\_\_\_ day of \_\_\_\_\_, the year of \_\_\_\_\_**

**X \_\_\_\_\_ Print Name \_\_\_\_\_**