## **Release of Liability**

## **Read Carefully - This Affects Your Legal Rights**

Familly Name:	J	J	3
In exchange for participation in the 1732 Keeaumoku St, Honolulu, Ha Honolulu church of Christ, I agree following:	e activity of Ohana Car awaii, 96822 and/or us	e of the property, facil	ities, and services of
<b>1. Agreement To Follow Direction</b> agree to follow any oral instruction representatives, or agents of Honol	ns or directions given b		
2. Assumption of the Risks and F above-described activity and I assufamily members, and further releast arising out of my or my family's us caused by the fault of myself, my f	ame full responsibility se and discharge Honol se of or presence upon	for personal injury to lulu church of Christ f the facilities of Honol	myself and (if applicable) my or injury, loss, or damage ulu church of Christ, whether
<b>3. Indemnification.</b> I agree to indeaction, damages, judgments, costs, in any way arise from my or my fa	or expenses, including	g attorney fees and oth	er litigation costs, which may
<b>4. Fees.</b> I agree to pay for all dama reckless, or willful actions by me of		Honolulu church of C	hrist caused by any negligent,
<b>5. Consent.</b> I, family members	,	,	,
above minor(s) to all of the terms a represent that I have legal authority	and conditions of this a	agreement. By signing	this Release of Liability, I
6. Medical Authorization. In the	event of an injury to th	e above minor during	the above-described

- **6. Medical Authorization.** In the event of an injury to the above minor during the above-described activities, I give my permission to Honolulu church of Christ or to the employees, representatives, or agents of Honolulu church of Christ to arrange for all necessary medical treatment for which I shall be financially responsible. This temporary authority will begin on July 18, 2025 and will remain in effect until terminated in writing by the undersigned or July 20, 2025, whichever occurs first. Honolulu church of Christ shall have the following powers:
  - a. The power to seek appropriate medical treatment or attention on behalf of my child as may be required by the circumstances, including without limitation, that of a licensed medical physician and /or a hospital;
  - b. The power to authorize medical treatment or medical procedures in an emergency situation; and
  - c. The power to make appropriate decisions regarding clothing, bodily nourishment and shelter.
- **7. Applicable Law.** Any legal or equitable claim that may arise from participation in the above shall be resolved under Hawaii law.
- **8.** No Duress. I agree and acknowledge that I am under no pressure or duress to sign this agreement and that I have been given a reasonable opportunity to review it before signing. I further agree and acknowledge that I am free to have my own legal counsel review this agreement if I so desire. I further agree and acknowledge

that Honolulu church of Christ has offered to refund any fees I have paid to use its facilities if I choose not to sign this agreement.

- **9. Arm's Length Agreement.** This agreement and each of its terms are the product of an arm's length negotiation between the Parties. In the event any ambiguity is found to exist in the interpretation of this agreement or any of its provisions, the Parties, and each of them, explicitly reject the application of any legal or equitable rule of interpretation which would lead to a construction either "for" or "against" a particular party based upon their status as the drafter of a specific term, language, or provision giving rise to such ambiguity.
- **10. Enforceability.** The invalidity or unenforceability of any provision of this agreement, whether standing alone or as applied to a particular occurrence or circumstance, shall not affect the validity or enforceability of any other provision of this agreement or of any other applications of such provision, as the case may be. Such invalid or unenforceable provision shall be deemed not to be a part of this agreement.
- **11. Emergency Contact.** In case of an emergency, please call Tagiilima Esene Jr (Relationship: Minister) at 808-861-2996 (Day), or 808-861-2996 (Evening).

I HAVE READ THIS DOCUMENT AND UNDERSTAND IT. I FURTHER UNDERSTAND THAT BY SIGNING THIS RELEASE, I VOLUNTARILY SURRENDER CERTAIN LEGAL RIGHTS.

Printed Name:	Date:
Signed Name:	