



STUDENT WAIVER AND RELEASE

I, _____ the parent/guardian of _____, HEREBY WAIVE AND RELEASE Unidos por Siempre Orphanage and DOXA (hereinafter the "Released Parties") from any and all liability to the above named minor child. I am fully aware of the risks involved in the activity described below, and waive any claims this minor child may have as a result of an accident, mishap or negligence of the Released Parties and/or any other party under or affiliated with the Released Parties.

This waiver shall be binding on said minor child named above, myself, his or her heirs, assigns and the next of kin, and shall extend to the benefit of the Released Parties and their successors and assigns. I understand that the activities in which the minor child named above will be involved are inherently dangerous and may cause serious injuries, including bodily injury, damage, loss or theft of personal property and death in relation to travel to and from Tijuana, Mexico, all house building and construction activities undertaken at DOXA's leased property and the Unidos por Siempre Orphanage in Tijuana, Mexico, travel to and from house building sites and at the house building sites, including but not limited to any activities while the minor child named above is physically on such premises.

To the best of my knowledge, the minor child named above does not have any physical limitations, medical ailments, physical or mental disabilities that would limit him or her from participating in the above mentioned activity, and if required, he or she will obtain a medical examination and clearance.

I have read and fully agree to the terms of this waiver and release. I understand and confirm that by signing this waiver and release I have given up considerable future legal rights that the above named minor child and I may have against the above named released parties. I have signed this waiver freely, voluntarily, under no duress or threat of duress, without inducement, promise or guarantee being communicated to me. My signature is proof of my intention to execute a complete and unconditional waiver and release of all liability to the full extent of the law. I am mentally competent to enter into such an agreement.

I declare that the foregoing is true and correct. Signed on this ___ day of _____, 20___, in the City of _____, County of _____ and State of _____.

Signature: _____

Printed Name: _____



ADULT WAIVER AND RELEASE

I, _____ HEREBY WAIVE AND RELEASE, Unidos por Siempre Orphanage and DOXA, Inc. (hereinafter "Released Parties") from liability pertaining to the activities and matters set forth below. I understand that by signing this Waiver and Release, I expressly and willingly agree to assume complete responsibility for any risk of injury that may arise from the below related activity. On behalf of myself, my heirs, assigns and next of kin, I waive all claims for damages, injuries, and death sustained to me or my property, that I may have against the above named Released Parties relating to such activity. I understand that the activities that I will participate in are inherently dangerous and may cause serious injuries, including bodily injury, damage, loss or theft of personal property and death. By this waiver, I assume any risk, and take full responsibility and waive any and all claims of personal injury, including severe bodily injury, damage, loss or theft of personal property and death relating to all activities associated with travel to and from Tijuana, Mexico, all house building and construction activities undertaken at DOXA's leased property and the Unidos por Siempre Orphanage in Tijuana, Mexico, travel to and from house building sites and at the house building sites, including but not limited to any activities while I am physically on such premises. If I am injured from said activity I will not hold the Released Parties responsible even if the injuries were caused by the negligence on my part or the Released Parties, or any other party under or affiliated with the above named Released Parties.

I do not have any physical limitations, medical ailments, physical or mental disabilities that would limit or prevent me from participating in the above mentioned activity, and if required will obtain a medical examination and clearance.

I am over the age of 18 and I have read and fully agree to the terms of this waiver and release. I understand and confirm that by signing this waiver and release I have given up considerable future legal rights that I may have against the above named released parties. I have signed this waiver freely, voluntarily, under no duress or threat of duress, without inducement, promise or guarantee being communicated to me. My signature is proof of my intention to execute a complete and unconditional waiver and release of all liability to the full extent of the law. I am mentally competent to enter into such an agreement.

I declare that the foregoing is true and correct. Signed on this ___ day of _____, 20___, in the City of _____, County of _____ and State of _____.

Signature: _____

Printed Name: _____