



***RIDING
DATES***

March 8th
Turkey Bay

March 22nd
Turkey Bay

April 5th
Turkey Bay

April 26th
Turkey Bay

June 7th
Windrock

Oct 9 – 11th
Turkey Bay

Name: _____

Phone: _____

Email: _____

DOB: _____

Address: _____

City and State: _____ Zip: _____

Type of Vehicle: 4-wheeler UTV (side-by-side) Dirt Bike

Experience Level: Beginner Intermediate Expert



Grace
BAPTIST CHURCH

Real People connecting Real Faith with Real Life



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**Trails of Grace
Medical Release/Consent Form**

Name: _____

I, the undersigned, do hereby consent to participation in Trails of Grace, a ministry of Grace Baptist Church, Springfield, TN. Further, I certify that I am physically fit and adequately prepared to participate in all events. **If I wish to revoke this consent for any reason, I will promptly notify the Pastor in writing.** I release Grace Baptist Church from all liabilities, financial and otherwise, related to me and my property.

Medical Treatment Authorization

I authorize Grace Baptist to make emergency medical care decisions on my behalf if I am incapacitated in any way. I authorize Grace Baptist Church to act in my place to consent to all necessary and appropriate x-ray examinations, anesthetic, medical or surgical diagnosis or treatment, and hospital care.

I understand that Grace Baptist Church of Springfield, TN and its representatives will not be responsible for medical expenses incurred solely on the basis of this authorization. I further agree to notify the Pastor in writing of any health changes that would restrict my participation in any normal activities. I also understand that the Pastor and designated leaders reserve the right to restrict me from any activity that they do not feel is within my physical capabilities.

Name

Date



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