



# Youth With A Mission

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## Relief and Development Services Tanzania- Morogoro Centre

P.O. Box 6123 \* Morogoro \* TANZANIA \* East Africa

### **RELEASE OF LIABILITY**

I/We do hereby release YOUTH WITH A MISSION, its staff, agents and volunteer assistants from any liability whatsoever arising out of any injury, damage or loss which may be sustained by said person(s) during the course of involvement with YOUTH WITH A MISSION.

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE(dd/mm/yy): \_\_\_\_\_

Signature of Parent or Guardian is required, if applicant is under 18 years of age:

Signature: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ DATE (dd/mm/yy): \_\_\_\_\_

### **CONSENT FOR TREATMENT**

In case of emergency, I/We hereby agree to the performance of such treatment, including anaesthesia and surgery, as the attending doctor or physician may deem necessary.

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE (dd/mm/yy): \_\_\_\_\_

Signature of Parent or Guardian is required, if applicant is under 18 years of age:

Signature: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ DATE (dd/mm/yy): \_\_\_\_\_

### **CONSENT FOR BURIAL**

In case of death while serving in the mission field, I/We hereby agree to release YOUTH WITH A MISSION from all financial obligations and permit them to bury my body in the country in which I am serving.

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE (dd/mm/yy): \_\_\_\_\_

Signature of Parent or Guardian is required, if applicant is under 18 years of age:

Signature: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ DATE(dd/mm/yy): \_\_\_\_\_

.....  
I/We prefer that my body be sent home and my family will incur all costs.

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE(dd/mm/yy): \_\_\_\_\_

Signature of Parent or Guardian is required, if applicant is under 18 years of age:

Signature: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ DATE(dd/mm/yy): \_\_\_\_\_  
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