**Health Caring Ministries**

**Hospital Centro Socorro De Lo Alto**

**Honduras**

**Team Member Manual**

It is with enthusiasm and anticipation that this team manual has been prepared to help you experience a rewarding and fulfilling mission trip. Please read it carefully as it contains pertinent team and travel information.

Our prayer at Health Caring Services for each of you is that God will richly bless your life and that you leave Honduras believing it is truly “more blessed to give than receive.”

**Hospital: (History & Description)**

Hospital Socorro De Lo Alto (translated: Hospital Help from on High) is a twenty-six (26) bed hospital located in Sula, Macuelizo, Santa Barbara, Honduras.

With an in-house physician on staff, the emergency room is operational 24/7. The hospital has four (4) operating rooms, a pre-operative suite, a recovery room and central sterile supply area. In addition, the hospital has a laboratory, radiology, labor and delivery services and a pharmacy. An outpatient clinic houses general consultation rooms, dental and eye clinic services.

Health Caring Services (HCS) is an American 501(c)3 that provides administrative and logistical support for Hospital Socorro de lo Alto, in Sula, Honduras, facilitating the shipments of supplies donated in the United States, the preparation of the team trips, and transferring of monies donated in the USA.

There is no undergirding organization for the Hospital, therefore, a minimal payment is made by patients who can afford to pay, but no one is refused care due to financial reasons. Health Caring Services and the Hospital do not want to undermine the enthusiasm of Honduran people to care for themselves and their families.

**Lifestyle Statement**

Health Caring Services (HCS) a Christian organization as is Hospital Centro Socorro De Lo Alto. Hondurans view alcohol consumption, cursing, smoking and drug use, as well as unmarried couples rooming together, as non-Christian behaviors. In light of our desired witness in the community, Health Caring Services asks you to refrain from alcohol, smoking, cursing and drug use on or off the hospital campus while working with the hospital, as well as other behaviors that might prove offensive to our hosts and compromising to the expressed Christian beliefs of the hospital. Please help us respect the Hondurans and protect the ministry of HCS and the Hospital.

**Patient Privacy and Social Media Statement**

Health information is considered amongst the most sensitive and personal information that individuals possess. Just as patients must be able to trust their doctors with their lives and well-being, they should also be able to feel more than reassured that their health records are safe with the clinician. Besides caring for our patients, we must respect their dignity and privacy and protect their confidential information.

**Violation of this policy is taken very seriously by the Health Caring Services Board and violations will be reviewed for appropriate discipline for the offending party.**

* This entire detailed policy is found at the end of this Team Member Manual and each team member will need to consent to the policy when they apply for the trip.

**Consent, Assumption of Risk, Release of Liability, Waiver and Indemnification**

* Team members must indicate their acceptance of the Consent, Assumption of Risk, Release of Liability, Waiver and Indemnification as stated on the application. Parental acceptance of the waiver is required for any team member under the age of 18 years.
* This form is also found at the end of this Team Member Manual.

**Team Cancellation**

Team safety is our top priority. If for any reason HCS feels the team's safety could be in jeopardy when traveling in Honduras, HCS reserves the right to cancel the trip.  This would be done only after thoroughly investigating the situation with our overseas directors.   Every effort would be made to reschedule but there is no guarantee this would be possible.  HCS will not be responsible for any expenses lost due to the cancellation and advises team members to investigate the purchase of trip cancellation insurance. See information below under “Travel Information”.

**Travel Information**

**Passport:**

- A passport is required for travel into Honduras. No visa is required from the USA or Honduras.

- **Passports must be valid for 6 months from date of departure FROM** **Honduras**. If your passport does not meet this requirement, you must renew your passport as you will not be allowed to depart from the USA.

- It is recommended that you carry a copy of your passport and 2 passport size pictures with you; keep these separate from your passport.

- You will need to have your passport available when you check-in at the US airport and pass though immigration in Honduras, as well as when you re-enter the USA.

- Make sure that you have your passport in a secure place during your trip.

**Immunizations:**

- No immunizations are required to enter Honduras.

- Health Caring Services is recommending every team member have the vaccine for COVID-19.

- An updated Tetanus (within ten years) and malaria prophylaxis are recommended.

- Check with your doctor for immunization suggestions, i.e. Hepatitis A&B, etc.

**Honduran Government Requirements for Travel to Honduras (November, 2020)**

Each team member is responsible for knowing and abiding by the current travel requirements for the time of their travel.

<https://travel.state.gov/content/travel/en/traveladvisories/traveladvisories.html/> or . <https://travelbans.org/north-america/honduras/>

All travelers entering or exiting Honduras **MUST** complete the immigration pre-check form at <https://prechequeo.inm.gob.hn>; Travelers will receive a confirmation email, which they should print and carry with them.

Your team leader has detailed instructions as to how to fill out this form.

Team leaders will also have pertinent information that is needed to prepare for travel.

**US “STEP” program- Smart Travelers Enrollment Program**

- HCS recommends that all team members enroll in the STEP program to receive security messages and make it easier to locate you in case of an emergency. <http://step.state.gov>

**Travel Insurance:**

- All team members will be required to submit a Travel Insurance policy that includes Emergency Evacuation in case of a medical emergency.

- This policy will be submitted with the team member's airline travel itinerary, at least 4 weeks prior to departure to Honduras, sent to HCS Team administrator- jillcw8812@yahoo.com

- This insurance must include at least $500,000 in evacuation coverage, as recommended by travel professionals.

- Insurance policy must be carried with team member while traveling.

- Suggestions:

  -  Travelex has a policy that covers the requisite evacuation insurance. To Enroll by phone:  Call Travelex at: 800.228.9792; for access to the Borton Overseas’ policy, reference the following when enrolling: Location number: 23-0384; enroll on-line and use the same location number. Your team leaders has more information on this policy.

For coverage of pre-existing medical conditions, this policy must cover the entire cost of the trip and be purchased within 21 days of any initial payment for the trip. (2021)

    - IF anyone is a current member of Rural Metro, there is coverage that can be purchased for evacuation from outside the USA. Each person would need to make this purchase individually and know the terms of the policy.

- There are many companies that provide coverage for evacuation; the team member must make sure the coverage meets the required $500,000 minimum. Airline policies usually do NOT offer enough evacuation coverage.

**Booking a Flight:**

- Consult with your team leader before making flight reservations to make sure you are booking in conjunction with the rest of your team.

- In order to reduce chaos and expenses, **all team members are to arrive into Honduras on the same day, using flights that arrive mid-day to early afternoon, and depart the hospital on the same day,.**

- ALL itineraries and travel insurance policies are due into HCS 4 weeks before departure, sent via email to HCS administrator- jillcw8812@yahoo.com

- Team members will be picked up at the airport in San Pedro Sula by the hospital transport.

- Confirm with your airline the baggage requirements and fees. The hospital is not responsible for baggage fees.

- **No evening flights will be accommodated by hospital transport.** Team members should not arrive at night.  It is not safe to have personnel on the road after dark.  A night arrival will necessitate team members spending the night in San Pedro Sula at the Hotel Copantl at their own expense. The Hotel Copantl has airport pick up, English speaking staff and is safe. Hotel information is given below.

- If your travel plans are not coordinated with the team arrival and departure dates, you MUST have your proposed itinerary reviewed BEFORE purchasing your ticket.

- There will be a charge of $75 if the hospital needs to arrange a special pickup from San Pedro Sula or return transport to the airport. This extra charge is to cover transport and staff expenses and will be paid for at the Hospital.

The team member is to be responsible to make sure this charge is paid for when they are at the hospital.

- HCS has a relationship with Adoption Airfare®. You may contact this travel agency personally or your team leader will tell you how your team will be making the team travel arrangements. Office: 800-277-7651 (Click '0' for Operator)

**Travel Hints:**

- Some teams travel all together; others come from various places and meet in San Pedro Sula. Your team leader will provide you with information as to the arrival of members on your team and how to proceed through immigration and customs.

If you have questions, contact your team leader.

**Immigration Form**

- On the plane you will receive an immigration form asking for your address while in Honduras. Hospital address: **Centro Socorro De Lo Alto Sula, Macuelizo, Santa Barbara, Honduras. Telephone: 011-504-2657-41-60 (outside Honduras)**

**Upon arrival at the San Pedro Sula airport:**

- Proceed to immigrations, then to baggage claim, exiting through customs to the hospital transport.

- Your team leader may send out information as to how to gather luggage, go through customs and proceed to the Hospital transport vehicles. Contact your leader with any questions.

- When passing through immigrations and customs, it is better to not offer unsolicited information, and this is not the best time to practice your Spanish.

- The airport staff may or may not want to see your luggage stickers and match them with your luggage. Normally none of the luggage is searched, however, it can be a long wait standing and moving through customs. Consider carry-on luggage with wheel.

- Each team member is responsible to make sure their baggage is collected and gets put onto the hospital transport vehicle.

- After all the baggage is loaded onto the hospital vehicles, use the restrooms or purchase food as needed. Team members should return to the vehicles promptly so as to facilitate departure for the hospital.

- The drive from San Pedro Sula to Sula is approximately 1 ½ hours. There are no bathroom facilities along the way.

**Exchanging Money:**

- Do not exchange money at the airport.

- Most vendors and stores take US$ or credit cards. But if you want to have lempiras, the money may be exchanged in Sula at the bank. Your team leader will assist you in arranging the exchange of money if needed.

**In case of travel issues**

- The following detailed information is provided for team members in case there are issues related to travel and you will be delayed in your arrival in San Pedro Sula.

- Keep this information with you as you travel so you know what to do.

- If a team member(s) encounters travel complications and isn’t arriving when scheduled:

* + First: **BEFORE** leaving the USA, if possible, the team member should communicate with their team leader via phone, or, if necessary, text or e-mail.
  + Second: **BEFORE** leaving the USA, an e-mail or telephone call should be made to Mary Kinsey or the hospital in Honduras to formulate a plan:
    - the team member should provide new arrival time and airline
    - the team member will be notified that the email has been received by Mary and will be provided with instructions regarding transportation plans
      * **Mary Kinsey:**
      * [otrasula@yahoo.com](mailto:otrasula@yahoo.com)
      * **001-504-9573-23-78 (outside Honduras)**
      * **9573-23-78 (inside Honduras)**
      * **The hospital:**
      * **Noemi- 011-504-**9572-66-40
      * **011-504-2657-41-60 (outside Honduras)**
      * **2657-41-60 (inside Honduras)**
      * [hsocorrohond@yahoo.com](mailto:hsocorrohond@yahoo.com)
* **After arrival in Honduras,**:
  + - 1. team member should proceed though immigration, collect baggage and go through customs; upon exiting customs, look for a man who would be holding a sign with the hospital and team member’s name
      2. if no email has been received before departure from the USA, check to see if an email has come, or call or email 1) Mary or 2) Noemi (Spanish only) from the airport, using an airline employee for assistance if necessary; contact information is listed above
      3. if no one is there from the hospital for the pick-up, the team member should not wander about the airport; go to Wendy’s Restaurant and wait there; Hospital personnel will always have an ID badge or Hospital sign
* **Should the arrival be late evening or in the night:**
  + 1. **BEFORE leaving the USA, email or call Mary at the hospital using the contact information listed above, providing the new arrival time and airline; you will receive an acknowledgment email with new instructions**
       - **If an email doesn’t arrive before you leave the USA, check your email upon arrival in San Pedro Sula**
    2. **BEFORE** leaving the USA, **make a reservation at the Hotel Copantl**
  + Hotel Y Club Copantl

Boulevard del Sur

Residencial Los Acros 1 calle, 50432

San Pedro Sula, Honduras

* + Telephone if you are IN Honduras: 556-8900
  + Telephone if you are IN the USA: 011-504-556-8900
    - * tell the hotel you are with the Hospital in Sula- Hospital Centro Socorro De Lo Alto for the hospital rate
      * **give the hotel your arrival time and airline and flight number; ask to be picked up at the airport**
    - **the Hotel will send a shuttle or a taxi to the airport and have a sign with your name**
    - **once at the hotel, email Mary and arrangements will be made for being picked up as soon as possible**
    - **enjoy a night and a delicious breakfast in a lovely hotel!**

**- All hospital drivers will have a sign and/or a Hospital badge for Hospital Socorro De Lo Alto.**

**Lodging & Meals:**

- Lodging is provided on the hospital campus in the Team House. All team members will lodge in the team house during their scheduled work days.

- Meals are served at the Team House and are prepared by the Team House staff:

Breakfast: 6:00 AM

Lunch: 12:00 Noon

Dinner: 6:00 PM

If there are team members who will not be able to eat at the designated times, ask the team house kitchen staff to prepare the required number of plates; they will be left in the team house kitchen and may be warmed in the microwave.

- Kitchen staff hours are 5:00AM – 8:00 PM.

- Special Dietary Needs:

Team House Kitchen staff are not trained dietitians. Much of Honduran food is based around starches. The concept of sugar free and gluten free is unknown to them. Therefore, if you have a special dietary need, you need to bring transportable food items to meet those needs.

**General Information:**

- Various team members may give daily devotionals at breakfast. It is a good way to start the day.

- White Boards are located in the Operating Suite. Pertinent team information may be found here. Please check the board daily.

- Towels, wash cloths, bed linens, blankets and toilet tissue are provided in the team house for team members.

- A computer is provided in the Team House but is in high demand. You may wish to bring your own. Wi-Fi is also available in the team house and hospital.

- Coffee orders for bringing coffee home are arranged by your team leader. Contact your team leader for information about ordering coffee.

- Do not drink tap water. Drinks are available in the team house for team members. **We encourage you to bring a water bottle to save on bottle waste.**

- Do not flush TP.

- When leaving to come home, keys to dorm rooms will be left in a designated basket in the team house.

**Clothing:**

- Scrub suits are the attire for work. Bring your own scrubs. Scrubs are not worn off the hospital campus.

- Shorts and pants are allowed and worn on days off. Please be discreet, very modest and respectful in your dress.

- The team house is equipped with a washer and dryer. Laundry soap is provided.

**Money & Valuables:**

- Most vendors in Honduras will take dollars. If you desire to exchange money, speak with your team leader to make arrangements.

- Banks and vendors will refuse to accept any dollars with marks, smudges or tears. Inspect your bills carefully before departure. Cashier checks are NOT accepted in Honduras.

- Lockers are provided in the operating suite. Team members may bring personal items to the hospital for security while working. The lockers are small and will accommodate small to medium locks only. Team members bring their own locks.

- It is advisable to leave all of your jewelry at home except for an inexpensive watch. Do not wear earrings while shopping in the city, they are an easy target, and earlobes are vulnerable.

**Safety Issues:**

**Team members are never to leave the hospital compound without an escort that has been arranged with the hospital staff; contact your team leader**

The same measures we use in the United States to stay safe are also used in Honduras.

When you are off the hospital campus:

1. Be aware of your surroundings

2. Do not patronize bars, clubs and places where trouble can start

3. Never carry a lot of money in your pocket or wear jewelry- even costume jewelry can be a target

4. Never walk alone in a town or city

5. Do not give your personal address, e-mail, telephone number to anyone which includes hospital staff, patients/ families and translators.

6. Hondurans are not invited into the Team House, this includes the interpreters and hospital staff.

**Expenses**:

- People participating with mission teams pay their expenses.

- Airfare is variable.

- Emergency Evacuation Insurance with a coverage of $500,000/ per person (see information above)

- The team fee paid covers transportation to and from the airport, food, lodging, 1 COVID-19 Ag test and team expenses, i.e. translators.

Team fees are as listed below:

1 week: $375.00 per person

10 days: $525 per person

2 weeks: $700 per person

2.5 weeks: $850 per person

Extra day charge: $45.00 per day

Expenses not included in above fee list:

- COVID-19 test that may be required for entry into Honduras or reentry into the USA

- Tours/tour guides/meals off hospital campus/souvenirs/shopping/meals

- Traveling to and from Honduras; hotel and airport transfer fees to/ from hotel; extra charges incurred for extra trips to and from the airport and hospital due to arrivals/ departures not coordinated with the rest of their team members

- Airline fees for checked baggage

- Donations to and expenses for medical missions are tax deductible. You will receive a tax donation letter from HCS for your team trip fees paid to HCS. For your personal tax preparation, keep your receipts for your travel and other expenses. Consultation with your tax authority may be beneficial.

- Team members can have others donate toward their trip expenses by using the “Donate” tab on the Health Caring Services web site: www.healthcaringservices.org; donations are tax deductible

**Recreational Trips:**

- All recreation plans/trips are planned by your team leader and are coordinated with the team’s work schedule at the hospital.

**Packing/Personal Needs:**

- Packing of items to bring should be evaluated according to airline regulations.

- Keep all prescription medications in pharmacy labeled bottles and over the counter medications in original containers.

- supplies for medical use are very limited, therefore we request that you bring the following items for your use: personal mask(s) to wear outside of the Hospital, pocket hand sanitizer, gloves to use as you feel necessary, individual hand wipes

- The following items are suggested to bring in addition to your personal items: rain coat/ insect repellent/anti-diarrhea meds/ Kleenex/hand wipes/antibacterial hand cleaner/bar of soap/shower shoes/packing tape/special snacks or foods/hair dryer/ flashlight/alarm clock/ear plugs/blood pressure cuff and stethoscope (medical staff)/pens/routine medications, soap and shampoo.

- With the medical and natural disasters of 2020, items like clothing, household items, school supplies, toys and play items for children, are needed to help people rebuild their lives and may be tucked into your luggage. Puzzles, coloring items and stuffed toys are good for young pre-op and clinic patients and visitors.

Continued on the next page….

**Contact Information in Honduras**

Centro Socorro De Lo Alto

Sula, Macuelizo,

Santa Barbara, Honduras

Kilometro 72

Calle hacir occidente del pais

Telephone: 011-501-2-657-41-60

e-mail: [hsocorrohond@yahoo.com](mailto:hsocorrohond@yahoo.com)

Mary Kinsey

Telephone in Honduras: 011-504-9573-23-78

e-mail: [otrasula@yahoo.com](mailto:otrasula@yahoo.com)

**For I was hungry, and you gave Me something to eat;**

**I was thirsty, and you gave Me something to drink;**

**I was a stranger, and you invited Me in, naked, and you clothed Me;**

**I was sick, and you visited Me; I was in prison, and you came to Me;**

**Then the righteous will answer Him,**

**“Lord, when did we see You hungry, and feed You,**

**or thirsty, and give You something to drink?**

**And when did we see You a stranger, and invite You in,**

**or naked, and clothe You?**

**When did we see You sick, or in prison, and come to You?**

**The King will answer and say to them,**

**“Truly I say to you, to the extent that you did it to**

**one of these brothers of Mine,**

**even the least of them,**

**you did it to Me.”**

**Matthew 25:35-40**

**Patient Privacy and Social Media Statement**

Health information is considered amongst the most sensitive and personal information that individuals possess. Just as patients must be able to trust their doctors with their lives and well-being, they should also be able to feel more than reassured that their health records are safe with the clinician. Besides caring for our patients, we must respect their dignity and privacy and protect their confidential information.

**Protected Health Information:**

* Protected health information is the term given to health data created, received and stored.

**Individually Identifiable Health Information:**

* Names (Full or last name and initial)
* Dates (other than year) directly related to an individual
* Phone Numbers
* FAX numbers
* Email addresses
* ID Numbers
* Biometric identifier (includes finger print)
* Full face photographic images and any comparable images
* Any other unique identifying characteristic (such as tattoos)

**Clinical Photography/ video:**

* **NO CLINICAL PHOTOGRAPHY/ VIDEO MAY BE POSTED ON SOCIAL MEDIA.**
* All departments of patient care are considered clinical photography/video areas.
* Clinical photography/video may be used in medical education.
* No patient’s identifiable health information may be on the photograph or video.

**Non -Clinical Photography/video:**

* Non-clinical photography/video subjects refer to friends and family of patients accompanying the patient to the hospital.
* Non-clinical photography/video requires verbal consent from the subjects as a courtesy to individuals being photographed.
* Posting of non-clinical photos/videos to social media is acceptable if the person posting took the photos/video.

**Public Photography/video:**

* Public photography/video refers to any photos taken in any place where people have no reasonable expectation of privacy.
* Public photography/video may be uploaded to social media**.**

***Consent, Assumption of Risk, Release of Liability, Waiver, and Indemnification***

I understand that all mission trips abroad carry with them significant risks. Although Health Caring Services, Inc., a Kentucky nonprofit corporation (“HCS”), has taken reasonable and prudent steps to reduce foreseeable risks, they still exist. Accordingly, in exchange for my, and my minor child(ren), if applicable, being allowed to participate in the upcoming mission trip to Hospital Socorro de lo Alto (the “Hospital”) to provide health care services to local Hondurans, coordinated by HCS and the Hospital (the “Mission Trip”), I agree, on behalf of myself and my minor child(ren) who accompanies(y) me on the Mission Trip (individually and collectively, “I,” “me,” and “my”), to be bound by each of the following:

1. Voluntary Participation. I understand and confirm that my participation in the Mission Trip is voluntary. My participation in the Mission Trip is as a servant-learner and I will adopt that attitude when interacting with my fellow team members, the people I meet during the Mission Trip and the Hospital. I will abstain from making derogatory or offensive remarks or arguments regarding people, politics, sports, religion, race or traditions. I agree to support the mission of HCS, the Hospital, and the cause of Christ on the Mission Trip. I agree to respect and follow the advice of HCS concerning attire, drinking, smoking, drugs and cultural traditions that will help me to honor the mission and integrate into the local community.

2. Identification of Risks. I understand that there are certain dangers, hazards, and risks inherent in participation in the Mission Trip, including, but not limited to, those associated with travel to and from the Hospital; inadequacies of lodging; patient care inside and outside of the Hospital; unstable political situations; different and under-developed facilities; uncertain medical, transportation, and communication infrastructure; possible acts of terrorism; and health hazards due to contaminated food and water, diseases, pests, or poor sanitation. I understand that my participation in the Mission Trip may involve risk of injury and loss, both to person and to property. I also understand that the risk of injury may include the possibility of permanent disability or death, **and further may include the risk of exposure to novel coronavirus (collectively, with any mutation or variation, “COVID-19”)**. There may be other risks of participation in the Mission Trip, some of which may not be known or reasonably foreseeable at this time. I further understand that some of the premises, facilities, and equipment used in connection with the Mission Trip may not be owned, maintained, or controlled by HCS or the Hospital. I understand that this Consent, Assumption of Risk, Release of Liability, Waiver, and Indemnification is intended to address all of the risks of any kind associated with my participation in any aspect of the Mission Trip, including, particularly, such risks created by actions, inactions, fault, or negligence on the part of HCS, the Hospital and their respective directors, officers, employees, agents, volunteers, successors, or assigns (collectively, the “Releasees”), including, but not limited to, risks created by the following: (a) **the risk of exposure to COVID-19**; (b) my physical, emotional, and psychological limitations and/or discomfort; (c) the physical, emotional, and psychological limitations and/or discomfort of others; (d) the use and/or condition of premises on which various Mission Trip activities may occur; (e) the lack or inadequacy of policies, rules, or regulations with respect to the Mission Trip; (f) the failure of Releasees to foresee or protect me from actions, inactions, fault, negligence, recklessness, or intentional or criminal misconduct of other persons; (g) the inadequacy or unavailability of medical facilities, treatment, and/or professionals; or (h) the lack or inadequacy of supervision by Releasees.

**3.** **Assumption of Risk**. I assume all risks, known and unknown, foreseeable and unforeseeable, in any way connected with my participation in the Mission Trip, **including (but not limited to) risks associated with exposure to COVID-19**. I accept personal responsibility for any liability, injury, loss, or damage in any way connected with my participation in the Mission Trip, **including (but not limited to) risks associated with exposure to COVID-19**.

**4. Release of Liability and Waiver. I release and hold harmless Releasees from any and all liability for and waive any and all claims for injury, loss, or damage, including attorneys’ fees, to the fullest extent permitted by law, in any way connected with my participation in the Mission Trip, even if caused in whole or in part by the negligent acts or omissions of Releasees, including (but not limited to) risks associated with exposure to COVID-19 (a “Claim”). This release and waiver does not apply to gross negligence or intentional misconduct of Releasees.**

**5. Indemnification. I agree to indemnify and to hold harmless Releasees from any Claim or expense, including reasonable attorneys’ fees for the legal counsel of Releasee’s choice, in any way connected with a Claim. This includes, but is not limited to, the cost of defending any Claim I, or any member of my family, might make, or that might be made on my behalf, or on behalf of any of my family members, that is released or waived by this instrument.**

6. Policies and Exposure Notice. I agree to abide by all policies, rules, regulations, guidelines, and instructions of HCS, the Hospital, and the Honduran government including policies and safety measures intended to mitigate exposure to COVID-19, and to notify HCS or Mission Trip personnel immediately at any time prior to my departure or during the Mission Trip if I learn that I have, or may have been exposed to, or diagnosed with, COVID-19.

7. Consent to Medical Treatment. I authorize HCS and the Hospital to provide to me, through medical personnel of their choice, customary medical assistance, transportation, and emergency medical services should I require such assistance, transportation, or services as a result of injury or damage related to my participation in the Mission Trip. This consent does not impose a duty upon HCS or the Hospital, to provide such assistance, transportation, or services. I will assume the responsibility of all medical bills incurred as a result of such assistance, transportation or services. Additionally, should it be necessary for me to return home due to medical reasons, disciplinary action or otherwise, I will assume full responsibility for payment of all transportation costs.

8. Severability. If any provision (or portion of any provision) of this instrument is held to be invalid or unenforceable, that provision shall be enforceable in part to the fullest extent permitted by law, and such invalidity or unenforceability shall not otherwise affect any other provision of this instrument.

9. Applicable Law. In order to provide certainty in the law to be applied to the construction of this instrument, this instrument shall be governed, construed, and enforced in accordance with the law of the State of Kentucky without regard to its choice of law principles.

10. Modifications. This instrument may not be changed orally, and no modification, amendment or waiver of any provision contained in this instrument, or any future representation, promise or condition in connection with the subject matter of this instrument shall be binding upon any party hereto unless made in writing and signed by both parties.

11. Binding Effect. In the event of my death or incapacity, this instrument shall be effective and binding upon my heirs, estate, next of kin, executors, administrators, assigns and representatives and shall inure to the benefit of Releasees.

**I HAVE READ AND UNDERSTAND ALL PARAGRAPHS OF THIS CONSENT, ASSUMPTION OF RISK, RELEASE OF LIABILITY, WAIVER, AND INDEMNIFICATION. I UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS BY AGREEING TO IT. I AM AGREEING TO THIS CONSENT, ASSUMPTION OF RISK, RELEASE OF LIABILITY, WAIVER, AND INDEMNIFICATION VOLUNTARILY.**