

R. W. Tegler Youth Centre Waiver

IN CONSIDERATION of allowing my minor child/ward to participate in all the activities (including Skateboarding and Wall Climbing) and events related to Kids in Action and the R.W. Tegler Youth Centre. *Kids in Action may participate in out trips, and events at Hope Mission's Tegler Youth Center. Elements of the waiver pertain to these potential activities.*

I WARRANT TO YOU THAT:

I am the parent/guardian having full legal responsibility for my minor child/ward.

I am familiar with the **Kids in Action** program, and its components, and feel my child/ward can positively participate in this program.

I am familiar with the risk of serious injury and death which any participant doing Skateboarding/Wall Climbing and all other activities, must assume.

I believe that my minor child/ward is physically, emotionally and mentally able to participate in Skateboarding/Wall Climbing, Kids in Action and all other activities, and that his/her equipment (in the event that child/ward supply own equipment) is fit for use in these activities.

I understand, and will instruct my minor child/ward, that all applicable rules for participation must be followed and that at all times the sole responsibility for personal safety remains with my minor child/ward. (in the event a child is breaking the rules and/or putting another child/youth's safety at risk the individual in charge reserves the right to remove the disrupting child from the program immediately, permanently if deemed necessary.)

I will immediately remove my minor child/ward from participation, and notify the nearest official, if at any time I sense or observe any unusual or unsafe condition or if I feel that my minor child/ward has experienced any deterioration in his/her physical, emotional or mental fitness for continued participation in Skateboarding/ Wall Climbing and all other activities.

I UNDERSTAND AND AGREE, on behalf of my minor child/ward, myself, my heirs, assigns personal representative and next of kin, that my execution of this document constitutes:

An unqualified **ASSUMPTION OF ALL RISKS**, associated with the participation in Skateboarding/Wall Climbing and all other activities, by my minor child/ward even if arising from negligence, or gross negligence, including and compounding or aggravation of injuries caused by negligent rescue operation or procedures, of the Skateboarding/Wall Climbing and all other activities, organizer and any persons associated therewith of participating therein.

I UNDERSTAND that should any situation occur and my child requires medical attention, all costs incurred for the said medical care including ambulance fees, are my responsibility.

A FULL AND FINAL RELEASE AND WAIVER OR LIABILITY of Skateboarding/Wall Climbing and all other activities organizer and all persons and organizations associated with Skateboarding/Wall Climbing and all other activities, including, without limiting the generality of forgoing, its officers, directors, officials, agents and/or employees, other participants, sponsors, advertisers, owners and/or leasers of the premises used to conduct Skateboarding/Wall Climbing and all other activities, sanctioning bodies, medical personnel (the **RELEASEES**), of and from with the respect to all injury, disability, death or loss or damage to person or property whether arising from the negligence, or negligent rescue of or by the forgoing otherwise.

I am UNDERSTANDING AND AGREE NOT TO SUE the RELEASEES for any loss, injury, costs or damages of any form or type, howsoever caused or arising, and whether directly or indirectly from the participation of my minor child/ward in Skateboarding/Wall Climbing and all other activities.

I am in AGREEMENT TO SAVE and HOLD HARMLESS the RELEASEES, and each of them, from litigation expense, legal fees, liability, damage, award or cost, of any form or type whatsoever, they may incur, due to any claim made against them or any one of them whether the claim is based on the negligence or the gross negligence of the **RELEASEES** or otherwise.

I HAVE READ THE DOCUMENT THOROUGHLY. WHERE I DEEMED IT TO BE UNCLEAR I SOUGHT CLARIFICATION. I UNDERSTAND THAT THE RELEASEES ARE RELYING UPON MY WARRANTIES, ASSUMPTIONS, WAIVER AND RELEASE, UNDERTAKINGS AND AGREEMENTS WHEN ACCEPTING MY MINOR CHILD'S/WARD'S PARTICIPATION IN SKATEBOARDING/ WALL CLIMBING, KIDS IN ACTION, AND ALL OTHER ACTIVITIES.

I SIGN THIS DOCUMENT VOLUNTARILY AND WITHOUT INDUCEMENT

Signature of Legal Guardian

Printed Name of Legal Guardian

Signature of Witness

Printed name of Witness

Youth's Name

Today's Date DD/MM/YY

BY SIGNING THIS FORM I GIVE PERMISSION FOR ANY PICTURES/VIDEO OF MY MINOR CHILD/WARD TAKEN WHILE ATTENDING R.W. TEGLER/ KIDS IN ACTION PROGRAMS TO BE USED FOR PROMOTIONAL PURPOSES UNLESS SPECIFIED OTHERWISE IN WRITING.

CANADIAN TIRE JUMPSTART

Kids In Action is a Community Partner of Canadian Tire Jumpstart. Canadian Tire Jumpstart is a proud Canadian Charity helping children and communities participate in organized sports and recreational programs that might not otherwise have been able to participate. In order to access funding, Canadian Tire Jumpstart requires the submission of basic information about your child. This basic information consists of the child's first and last name, birth date, postal code and gender.

Confidentiality and security of the data submitted is deemed the highest priority to Canadian Tire Jumpstart. The data retained is never used or shared in any way, shape or form. Jumpstart's privacy policy and practices have been designed to ensure that all information collected is handled appropriately and is in accordance with the Personal Information Protection and Electronic Documents Act (PIPEDA) and applicable provincial legislation. Individual child information is not reported and is kept confidential unless expressed permission is received in writing from the parent/guardian to use it for some other purpose. A copy of Jumpstart's privacy policy is available at: <http://jumpstart.canadiantire.ca/en/privacy-policy>

I understand and agree that Kids In Action can share the basic information listed above with Canadian Tire Jumpstart.

Parent/Guardian Signature: _____

****Please complete the front and back of this form****





R. W. Tegler Youth Centre Waiver



Youth's Name: _____

Date of Birth (DD/MMM/YY): _____ Gender: _____

Address: _____

City: _____ Postal Code: _____

School: _____ Grade: _____

Name of Legal Guardian: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

E-mail: _____

Emergency Contact Name: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

MEDICAL INFORMATION

Alberta Health Care #: _____

We require a health care number for youth to participate in skateboarding, wall climbing and any field trips.

Medical Conditions: _____

Allergies or Food Restrictions: _____

Is there any other information we need to know?

****Please complete the front and back of this form****