



KAYAK & OUTDOOR ADVENTURE CAMP

REGISTRATION & CONSENT FORM

Registrant's Name: _____ **Age** _____ **Birth date** ____/____/____
MM / DD / YYYY

Parent/Guardian Name: _____

Address: _____ **Postal Code:** _____

Home Phone: _____ **Cell Phone:** _____ **Work Phone:** _____

Emergency Contact Information – Alternate Pickup/Release

First Name: _____ **Last Name:** _____ **Relation to child:** _____

Home Phone: _____ **Cell Phone:** _____ **Work Phone:** _____

Please list those people in addition to parents/guardians who are permitted to pick up your child:

1: _____ 2: _____ 3: _____

Medical Release Information

BC Care Card#: _____ **Other Health Insurance Provider(s):** _____

Physician Name: _____ **Clinic Phone:** _____

Clinic Address: _____

Please list any medical conditions, including any requiring maintenance medication (ie. Diabetes, Asthma, Seizures).

<u>Medical Problem</u>	<u>Required treatment</u>	<u>Should paramedic be called?</u>
_____	_____	Yes/No
_____	_____	Yes/No
_____	_____	Yes/No

Is your child presently being treated for an injury or sickness, or taking any form of medication for any reason? Yes__ No__

If yes, explain: _____

Is your child allergic to any type of food or medication? Yes__ No__ If yes, explain: _____

Does your child require a special diet? Yes__ No__ If yes, explain: _____

Any other medical information that we should be aware of: _____

The purpose of the above listed information is to ensure that medical personnel have details of any medical problem which may interfere with or alter treatment. Medical information will only be used for the purpose of helping your child.

In the case of an emergency, I hereby authorize my child to be treated by Certified Emergency Personnel (ie. EMT, First Responder, and/or Physician). Any cost incurred for medical care will be the responsibility of the parent/guardian.

Terms of Agreement

Behaviour Policy

Skeena Kayaking reserves the right to ask parents to withdraw their child from the program if basic behavior expectations are not met. Examples:

- Verbal or physical abuse against other participants or staff
- Stealing or any other illegal actions
- Behaviour that causes constant distraction for other participants or staff
- Constant disregard towards staff's direction or guidance

Personal Property

Skeena Kayaking and it's staff are not responsible for lost or damaged personal property.

Refunds & Changes to Camp Schedule

All scheduled events are subject to change. I understand that no fees will be refunded or transferred unless a child is unable to participate due to an accident or illness per physician orders.

Photo Release

I give permission for my child to be photographed during the **Kayak & Outdoor Adventure Youth Camp**. I understand the photos may be used to keep a journal of activities, to share in presentations and/or reports, as well as for promotional purposes including flyers, brochures, newspapers and on social media. I understand that although my child's photograph may be used for advertising, his or her identity will not be disclosed; I do not expect compensation and that all photos are the property of Skeena Kayaking.

Activities & Risks

I understand that my child will be participating in activities and be exposed to environments that may be prone to risk of injury. These activities may include, but not be limited to: kayaking, canoeing, swimming, running, hiking, lighting campfires, cooking over open flame, being exposed to natural elements (ie. prickly bushes, trees, slippery shorelines, water, rocks...), changing weather (hot sun, wind, rain...), wildlife encounters (live crabs, fish, bugs...), and other activities and exposures found outdoors.

I agree to assume all risks involved with my child (name) _____ in participating in the Skeena Kayaking – Kayak and Outdoor Adventure Youth Camps - 2024. I agree to indemnify and save harmless Skeena Kayaking,

It is understood that participants will be properly supervised and that reasonable safety precautions will be taken.

RELEASE AND INDEMNITY:

As a condition of rental of kayak(s), canoes, watersport and outdoor equipment, and/or participation in kayaking, canoeing and all other indoor and outdoor activities included in the Kayak and Outdoor Adventure Youth Camp - 2024, I assume all risk of personal injury, death or property loss resulting from any cause whatsoever including but not limited to the inherent risk of kayaking, canoeing, and other indoor and outdoor activities, negligence, breach of contract, or breach of statutory duty of care on the part of Seahorse Enterprises Ltd. (dba Skeena Kayaking) and their employees and agents (all of whom are hereinafter collectively referred to as: the Releasees.) I agree that the Releasees shall not be liable for any such personal injury, death, or property loss and release the Releasees and waive all claims with respect thereto. I agree that any litigation involving the Releasees shall be brought within the Province of British Columbia and further agree that these conditions and any rights, duties and obligations as between the Releasees and myself shall be governed by an interpret in accordance with the laws of the Province of British Columbia

I HAVE READ AND UNDERSTAND THIS AGREEMENT AND ALL OF THE INFORMATION IN THIS YOUTH CAMP PACKAGE. I AM AWARE THAT BY SIGNING THIS AGREEMENT **I AM WAIVING CERTAIN LEGAL RIGHTS** WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNORS MAY HAVE AGAINST THE RELEASEES.

I, the participant’s Parent/Guardian, hereby grant my child, _____, permission to participate in the Kayaking and Outdoor Adventure Youth Camp (ages 15 – 18 yrs) from July 8 - 12, 2024.

Name of Parent/Guardian

Parent/Guardian Signature

Date

Contact Phone Number

Witness Name (Print)

Signature

Date