



YMCA Camp Pine Crest Outdoor Centre **2011 Assumption of Risk and Authorization Form**

PARTICIPANTS and PARENTS/GUARDIANS for participants under 18 years of age are asked to read the following information CAREFULLY. This page must be signed prior to participation in programs or activities taking place at YMCA Camp Pine Crest.

I _____ am the legal parent/guardian of the child/children listed below, and I give permission for my child/children to participate fully in **YMCA Camp Pine Crest Outdoor Centre** programs operated by YMCA of Greater Toronto:
(print name of child / children)

I the undersigned parent/guardian hereby agree as follows:

ASSUMPTION OF RISK AND INDEMNIFYING RELEASE

While YMCA staff and instructors will make every reasonable effort to minimize exposure to known risks, I understand that in registering my child/children in a YMCA Camp Pine Crest Outdoor Centre program, my child/children will be involved in physical activities and that with any physical activity, there is risk of injury. I and my child/children have received an information package and have attended a family information session and/or discussed with a trip leader the YMCA program in which I am registering my child/children.

I do hereby release the YMCA of Greater Toronto (YMCA), and its respective officers, directors, employees, volunteers and agents, and their successors and assigns, from all liability for damages sustained in consequence of loss, injury or damage to myself or my child/children, and from all other actions, causes of action, claims, demands or damages of any kind with respect to death, injury, loss or damages to any person or property including myself or my child/children arising out of or connected with preparation for, or participation in YMCA programs or activities.

AUTHORIZATION

- (1) I have provided a complete and accurate health history and permit my child/children to participate in the full range of camp activities, except as noted by me.
- (2) In the event of an accident, injury or illness involving my child, and immediate contact by the YMCA with a parent/guardian cannot be made, I authorize and grant

permission to YMCA staff to secure proper medical treatment and authorize on my behalf all procedures, including admission to an emergency unit, hospital and treatment therein, ordering of x-rays, tests or treatment, injections, anesthesia and/or surgery, as deemed necessary by the attending medical professional(s). I agree not to hold the YMCA of Greater Toronto responsible for any costs or injury arising out of an emergency situation.

- (3) The YMCA may wish to use photographs, images or recordings containing my child/children's picture or image for promotional, advertising, public relations and/or informational purposes. Such photographs, images or recordings may be used or published in YMCA brochures, newsletters, annual reports, posters and/or on website/internet materials.

I hereby consent to the publication of these photographs, images, or recordings, and promotional advertising, public relations or information materials, and acknowledge and confirm that these photographs, images, recordings and materials shall remain the exclusive property of the YMCA, who shall own all copyright and other intellectual property rights therein.

CODE OF CONDUCT

- (4) The safety of each individual is of the utmost importance to the YMCA. I and my child/children recognize a personal responsibility to learn and follow at all times safety and other rules established by YMCA staff. I and my child/ children understand that any behaviour that places my child/children, or others, at risk may result in immediate dismissal from the program. I agree to assume any expense(s) arising from program dismissal. I understand no refund will be granted for dismissal or removal of my child/children at my or my child's/children's request before the end of a camp session.

In order to ensure the safety and well-being of all participants, the YMCA reserves the right to alter the program at any time without compensation to participants, parents or guardians.

I have carefully read, understand and freely and voluntarily accept Assumption of Risk and Release, Authorization, and Code of Conduct information outlined above. I have the authority to sign on behalf of the child's/children's parents and legal guardians.

Signature of Parent / Guardian

Date

Print Parent's/Guardian's Name