

DALHOUSIE CHILDREN AND YOUTH PROGRAM/CAMP - APPENDIX A

Guardian Waiver and Release of Liability Form

Child's Name:

Please list the camps your child is registered for: Camp Name: Date:

Camp Name: Date:

CONSENT AND WAIVER OF LIABILITY

In consideration of (name of child) being permitted to participate in the Dalhousie Summer Camps named above (the "Camp"), I, , the undersigned parent or legal guardian of the Child, on behalf of myself, my heirs, executors, administrators, and assigns, hereby:

1. Understand, appreciate and accept the inherent physical risks of the Camp, including that serious injury is possible and may result from my child's actions, the actions or interactions of others, or a combination of both.
2. Understand, appreciate and accept the inherent risk of exposure to COVID-19 that exists by attending the Camp and agree to comply with all directives from Camp staff related to COVID-19, including all requirements for social distancing.
3. Agree to be solely responsible for any personal property loss or damage, and/or any personal injury sustained by my child unless such loss damage or injury was caused by sole negligence of Dalhousie University, its employees or agents.
4. Have read, understand, and discussed the Camp Code of Conduct with the participant. I understand that failure to comply with the Camp Code of Conduct may result in my child being suspended and/or removed from the camp program.
5. Give permission to have photos and videos taken of my child during the Camp, which may then be used for promotional purposes by Dalhousie University and its affiliates.
6. Give permission for my child to participate in the Camp.

I understand and agree to the above.

Parent Name: Date:

Signed:

PICK-UP ARRANGEMENTS:

IMPORTANT! Photo ID and signature will be required at daily check out before children can be dismissed from camp. Also, children under the age of 12 will not be permitted to leave with anyone under 16 years of age (even if that person is a sibling).

I hereby authorize the following, to pick up my child from the Camp. If there are any changes in these arrangements, I will let the program staff know in writing in advance.

Name: Phone Number:

Relationship to child:

Name: Phone Number:

Relationship to child:

Is the participant permitted to leave camp on his/her own at the end of the day (**only permitted for children over the age of 12)?

Yes No

If there are any custody restrictions regarding your child, please contact the Camps Coordinator: 902-494-1959 or camps@dal.ca

Parent Name: Date:

Signed: