

## Waivers (Please check boxes and initial)



Participant Name: \_\_\_\_\_  
(the "Child")

Participant DOB (dd/mm/yyyy): \_\_\_\_\_

### Acknowledgment of Risk & Release of Liability

I acknowledge by contracting with BGC Kawarthas, I am aware of the risks involved in the activities my Child will be participating in at the Club. In consideration of my Child being permitted to come onto the property owned, leased, or contracted by the BGC Kawarthas, and participate in programs and services contracted by myself, I hereby agree to release and discharge BGC Kawarthas' officers, board members, servants, funders, volunteers, Club members, and employees from all liability claims and courses of action of any nature whatsoever in the event of any accident, injury, or sickness regarding my Child, myself, any spouse of mine, and any member of my family arising out of such use of properties and services of BGC Kawarthas.

I have read, understand, and agree to the above statement. \_\_\_\_\_ Initials

-----

### Peak Adventure Centre

I consent to my Child participating in Peak Adventure Centre programs. I understand that the Acknowledgement of Risk & Release of Liability includes Peak Adventure Centre programs and activities. I understand my Child can participate in Peak Adventure Programs at the age of 7 and above.

I have read, understand, and agree to the above statement. \_\_\_\_\_ Initials

-----

### Medical Waiver

To the best of my knowledge, I have fully disclosed any physical and/or health issues that could potentially affect my youth's participation in Club programs or activities. I authorize the Club staff to obtain medical advice and services as they deem necessary for the health and safety of my Child. In cases where my medical consent is needed, I authorize BGC Kawarthas employees to provide medical consent when all reasonable attempts to contact me, another parent/guardian of my Child, or an emergency contact has failed, as well as in the case of a medical emergency when there is not enough time to contact me, another parent/guardian of my Child, or an emergency contact, I accept full financial responsibility for all medical costs that exceed coverage provided by the Ontario Health Insurance Plan.

I have read, understand, and agree to the above statement. \_\_\_\_\_ Initials

-----

## Media & Promotional Disclosure

I acknowledge and agree that my Child may participate in an event or activity at, or operated by, the BGC Kawarthas and/or BGC Canada, or both, at which photographs, video(s), audio or similar or other recordings of Club members, including of my Child (hereinafter referred to as a "Personal Likeness"), maybe taken for the purpose of representing the BGC Kawarthas and/or Canada on or for promotional and other materials and advertising. I hereby give the BGC Kawarthas and/or the BGC Canada consent to use, disclose and reproduce my Child's Personal Likeness for promotional, marketing, fundraising and advertising purposes. I acknowledge and agree that my Child's Personal Likeness may be published or reproduced in newsprint, promotional videos, television commercials, program brochures, posters, the Internet or otherwise displayed to the public or used for other promotional, educational and/or fundraising purposes, in whole or in part, by the BGC Kawarthas, BGC Canada and/or external partners thereof.

I have read, understand, and agree to the above statement. \_\_\_\_\_ Initials

---

## Technology Agreement

I confirm and grant permission for my Child to utilize a Club Chromebook or other internet connected device while participating in Club programs or services. I recognize that participants using a Chromebook will receive a login and password. As a parent/guardian I understand that I am responsible for supervising my Child's use of technology devices and the internet at home to ensure that my Child does not use the Club's login and passwords on other devices, i.e. home computers or share the password with others. I understand that the Club monitors the use of Club accounts, including Chromebooks. Best efforts are taken to block inappropriate content that does not align with the Club's Core Values, or would be harmful to participants.

I have read, understand, and agree to the above statement. \_\_\_\_\_ Initials

---

## Canada's Anti-Spam Legislation (CASL) Consent Waiver

I consent/ opt-in to receive commercial electronic messaging (CEM) communications from Boys and Girls Clubs of Kawartha Lake (BGCKL) related to news, updates, programs, products, events, and/or initiatives. Please check off the commercial messages you consent to receive:

- from BGCKL Active Net Registration System.** *If you do not opt-in BGCKL will only send information related to current program/ service you and/or a family member have registered in to support safety and keep you inform of changes including payments, quality assurance and/ or program updates and changes.*
- from BGCKL E-Newsletter** provider Vertical Response.

I have read, understand, and agree to the above statement. \_\_\_\_\_ Initials

---

## Signatures

I represent and warrant that I am the parent, natural guardian and/or legal guardian of the Child, who is a minor and, in such capacity, on my behalf and on the behalf of the minor participant, the Child, I agree to the terms and conditions set out above.

Signature of Parent or Guardian of Minor Participant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Participant if 18 or older: \_\_\_\_\_ Date: \_\_\_\_\_