

YMCA Cedar Glen PROGRAM



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:

I _____ am the participant or legal parent/guardian of the child/children listed below, and I give permission for my child/children to participate fully in **YMCA Cedar Glen 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

- (1) While YMCA staff and instructors will make every reasonable effort to minimize exposure to known risks, I understand that I or my child/children will be involved in physical activities and that with any physical activity, there is risk of injury.

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

- (2) I have provided a complete and accurate health history and permit my child/children to participate in the full range of Cedar Glen activities, except as noted by me in the health information section of the YMCA registration form (if applicable).
- (3) In the event of an accident, injury or illness involving myself or my child, and immediate contact by the YMCA with 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 arising out of an emergency situation.
- (4) The YMCA may wish to use photographs, images or recordings containing myself or 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 materials. The YMCA will incur the full costs of such photographs, images or recordings, including development and printing.

I hereby consent to the publication of these photographs, images, or recordings, and promotional advertising, public relations or information materials (hereinafter "images and materials"), and acknowledge and confirm that these images and materials shall remain the exclusive property of the YMCA, who shall own all copyright, trade secret and other intellectual property rights therein, subject to the rights of any third party under an agreement with the YMCA. I also waive any and all rights to any personality and privacy rights of my

child/children to the YMCA for use on YMCA's website/internet materials, or in other promotional, advertising, public relations or informational materials.

CODE OF CONDUCT

(5) 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 program 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, Authorization, Code of Conduct information outlined above. I have the authority to sign on behalf of all the child's/children's parents and legal guardians.

Signature of Parent / Guardian

Date

Print Parent/Guardian Name

Participant Signature (if over 18)

Revised: May 2005