

**Rotary Club of Peterborough Kawartha**

**Adventure in Understanding – 2020 Consent and Risk Waiver**

**August 30, 2020 to September 04, 2020**

**Consent** **(Parent/Guardian):**

I /we permit\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (full name of participant) to attend the Adventure in Understanding: 6 Day Cultural Canoe Experience from August 30, 2020 to September 04, 2020 operated by the Rotary Club of Peterborough Kawartha.

I/we, the undersign, permit her/him to participate in the full range of activities and authorize the Rotary Club of Peterborough Kawartha volunteers, in the event of accident or illness affecting the above named, to authorize on my behalf all procedures, including admissions to hospital and necessary treatment therein, as deemed essential for the care and well-being of the above named. Such action is to be taken only when immediate contact with the undersigned cannot be made.

I/we am aware that photos will be taken and I/we hereby give my permission for such photos to be published in Rotary publications, local media and/or social media or in other electronic formats for press or print. If the participant’s image is used, I/we hereby consent, without further consideration or compensation to the use of images taken of the participant for the purposes of illustration, advertising or distribution of any manner. I/we understand that the images remain the property of the Rotary Club and that there will be no restrictions on the use of same. I/we accept that no payment is due in respect of this authority and that no further payments to me/us are required at any time.

**Risk Waiver (Parent/Guardian and Participant):**

In consideration of the acceptance and participation of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (participant’s name) in the youth programs we the undersigned on behalf of ourselves and our heirs, administrators, executors, successors and assigns, hereby release, indemnify and hold harmless all members, officers, directors, committee members, and employees of the participating Rotary clubs and districts, and of Rotary International and associated volunteers (“Indemnitees”), from any or all liability for any loss, property damage, personal injury, or death, including any such liability that may arise out of the negligence of any of the Indemnitees.

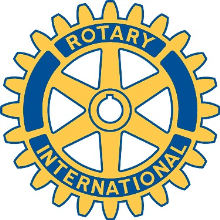
**Elements of Risk**

An educational activity program such as canoe-camping involves certain elements of risk. Accidents may occur while participating in these activities. These accidents may cause injury. A few examples of the type of accident which one is at risk of having while on such an excursion are:

* Twisted ankles – traditional native games, canoeing, camping
* Cuts/burns – fire making
* Poisoning – edible wild plants
* Hypothermia – overnight camping

The parties acknowledge that this is not an exhaustive list of possible activities. These accidents result from the nature of the activity and can occur without any fault on either the part of the participant, rotary or its volunteers or officers. By choosing to participate in the activity, one assumes the risk of an accident occuring.

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**I acknowledge that I have read and understand the Consent and Risk Waiver on Page 1 and that I sign this form voluntarily.**

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| --- | --- | --- | --- | --- |
| Date (dd/mmm/yyyy): | |  | | |
| Participant Signature: | |  | | |
| Please Print Name: |  | | | |
| As the signatory below, I confirm that I have full parental rights or I am the legal guardian of this participant. | | | | |
| Parent/Guardian Signature: | | |  | |
| Please Print Name: |  | | | |
| Parent/Guardian Contact Number(s): | | | |  |
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