

ASSUMPTION OF RISK and PERMISSION AGREEMENT

BY SIGNING THIS DOCUMENT, YOU AND YOUR CHILD'S LEGAL RIGHTS MAY BE AFFECTED.

PLEASE READ CAREFULLY

INITIALS

For the sake of this document, a child is defined as a minor under the age of 19

,	,
	(Full Name)
Residing at	
Hereby acknowledge, understand and ag	ree that:
am the parent or guardian of	(Participant's full name)
Oorn	(,
With my permission, my child will be parti	cipating in
or the week of	(program name)
(please state the week your child	will participate- ex July xx-Auguat xx, 2020)

I understand that my child cannot participate in the program unless and until I sign this ASSUMPTION OF RISK and PERMISSION AGREEMENT.

RISKS AND HAZARDS: Participation in the program may expose my child to many risks and hazards, some of which are foreseeable, some of which are not, some of which are inherent in the nature of the program, and some of which may rise from human error or negligence. These risks and hazards may include but are not limited to;

Falls to the ground or into water, collisions with other participants or equipment, misuse of equipment, variations in weather or temperature resulting in heatstroke, sunstroke or hypothermia, insect bites, exposure to wildlife, adverse plants such as stinging nettle or thorns, hazardous bystanders, impact, or injury,

And by result in serious physical injury even death, infections, and/or loss or destruction of property.

COVID-19 RISK: Participation in the program may also expose my child to the infectious agent SARS-COV-2 causing the potentially fatal disease COVID-19. The Gabriola Recreation Society has developed a number of COVID-19 related policies and procedures which are available for my review at <u>GRS Program Guidelines</u>. The risk remains, however, that despite the best efforts of the Gabriola Recreation Society, its directors, officers, employees, instructors, volunteers or members. GRS and my cooperation and that of my child, a COVID-19 outbreak could occur.

In consideration of GRS allowing my child to participate in the program, I agree:

- To assume all risks arising out of, or associated with, or related to my child's participation in the program even though such risks may have been caused by the negligence of GRS;
- To be solely responsible for any injury, loss or damage which my child might sustain while participating in the program even though such injury, loss or damage may have been caused by the negligence of GRS.

I have carefully read and fully understand the terms of this **ASSUMPTION OF RISK** and **PERMISSION AGREEMENT** and by signing it voluntarily, I am agreeing to its terms. The **ASSUMPTION OF RISK and PERMISSION AGREEMENT** is a legal document and is binding on me as well as upon my heirs, executors, representatives and assigns.

I have discussed the **RISKS AND HAZARDS** and the COVID-19 RISK with my child.

I have read and instructed my child to follow the program guidelines.

Signed at	_, BC, this	day of	, 20
Parent signature:			
Parent Name:	(printed)		
Witness signature:			
Witness name:	(printed)		