



MAPLE RIDGE
PARKS, RECREATION
& CULTURE

GREG MOORE YOUTH CENTRE

YOUTH PROGRAMS

INFORMED CONSENT AGREEMENT
10-12 YEARS

The personal information on this form is collected in accordance with Section 26(c) and (d) of the Freedom of Information and Protection of Privacy Act for the purpose of administering the Youth Services Youth Outreach Program. If you have any questions about the collection, use or disclosure of this information, please contact the Manager of Legislative Services, at 604-463-5221 or foi@mapleridgeca.

YOUTH SERVICES YOUTH OUTREACH INITIATIVE PROGRAM

We, the **UNDERSIGNED** hereby acknowledge that certain **RISKS OF INJURY** are inherent to participation in sports and recreational activities (**SKATEBOARDING/ IN-LINE SKATING/ SCOOTERING/ ROLLER SKATING/DROP-IN RECREATIONAL ACTIVITIES/ROCKCLIMBING.**) These types of injuries may be minor or serious and may result from ones actions, or the actions or inaction's of others, or a combination of both.

I/we understand that **RULES AND REGULATIONS** are designed for the safety and protection of participants and hereby undertake to abide by these rules and regulations as listed and or as dictated by youth centre staff.

RULES AND REGULATIONS

- 1.** Helmets must be worn while skateboarding/inline skating/roller skating or using skate equipment.
- 2.** No unsafe or reckless skating allowed.
- 3.** Participants will obey the instructions of the youth centre staff.
- 4.** All our programs are free from nicotine, alcohol & other drugs

I/we understand certain activities require a minimum **LEVEL OF FITNESS AND HEALTH** (physical, mental and emotional) and that each person has a different capacity for participating in these activities.

I/we understand and acknowledge that certain **RISKS OF INJURY** are inherent with **TRANSPORTATION** via a motor vehicle that are beyond our control and ASSUME THESE RISKS if they occur.

I/we agree **THE CITY OF MAPLE RIDGE** or its employees, servants or agents shall not be liable for any injury to my person or loss or damage to my personal property arising from, or in any way resulting from, my participation in theses activities, **UNLESS** such injury, loss or damage is caused by **SOLE NEGLIGENCE** of the **CITY OF MAPLE RIDGE** its employees, servants or agents while acting within the scope of their duties.

I/we the undersigned parent, guardian, do hereby agree to allow individual(s) named herein to be photographed/videotaped and to be used solely for the purposes of the Youth Outreach Initiative program, and Maple Ridge Parks, Recreation and Culture.

I/we declare having read and understood the above **INFORMED CONSENT AGREEMENT** in its entirety and hereby consent to participate acknowledging all of the foregoing.



YOUTH SERVICES YOUTH OUTREACH INITIATIVE PROGRAM

PARTICIPANT & GUARDIAN INFO

Signature Of Legal Parent Or Guardian *(If Participant Is Under 18Yrs)* _____

Print Name *(Parent Or Guardian)* _____

Signature Of Participant _____

Print Name *(Participant)* _____

Parent Contact # _____ Alternative # _____

Emergency Contact Name _____

Emergency Contact # _____

Address _____

Participant Birthdate _____

Allergies _____

Card Card # _____

SIGNATURE

Date Signed _____ Participant Age at Signing _____

Signature _____

