

EMERGENCY - CONSENT CARD

Print Form

- Save this form to your computer, complete the form then save it again
 - Print all 4 pages. Sign pages 1, 3, 4 and both informed consent forms.
 - Scan forms and submit electronically as a PDF (no photos) to e-mail on registration confirmation.
Alternatively bring paper copies to camp. (Note: Forms are not transferred between locations)

FIRST NAME LAST NAME SEX BIRTHDATE

ADDRESS

PARENT / GUARDIAN NAME HOME# WORK# CELL#

PARENT / GUARDIAN NAME HOME# WORK# CELL#

EMERGENCY CONTACT TEL

CHILD'S DOCTOR TEL

IS YOUR CHILD UP TO DATE ON HIS/HER IMMUNIZATIONS?

ALLERGIES / MEDICATIONS

MEDICAL CONDITIONS

CHILD'S DENTIST TEL

CONSENT FORM

FOR MY CHILD LAST NAME

PROVINCIAL HEALTH # / INSURANCE PROVIDER

It is our policy to notify a parent when a child is ill or needs medical attention. Occasionally we cannot contact parents and we need to get immediate help for the child. Please sign the consent below so that we can take appropriate action on behalf of your child. We will take this signed consent with us to the emergency centre.

I authorize the staff or person(s) in charge of my child's NVRC program to call a physician; take my child to the nearest emergency centre; or summon an ambulance for emergency medical aid, should, in the opinion of the person(s) in attendance, feel such services are required and I cannot be contacted by phone. If such emergency should arise, I shall be notified as soon as possible. I agree that any cost incurred for such services shall be the sole responsibility of myself.

DATE Signature of Parent/Guardian *

PLEASE NOTE:

1. It is the responsibility of the parent to update emergency information. Please advise staff of any changes
2. This information is confidential and be kept on file until the end of the program. This form can be returned to you or will be destroyed 15 weeks after camp services have concluded.

**Thank you for choosing an NVRC daycamp for your child
We can't wait to meet you!**

Please Note:

- Please give this form to your camp leader before leaving your child in our care.
- All information on this form is confidential.
- Forms will be shredded fifteen weeks after camp services end each season. Photo releases will not be shredded.
- Please contact our camp supervisors if you have any questions about this form or the camp your child is registered in.

Please type or print clearly. Please complete this form in full

PERSONAL INFORMATION (REQUIRED)

Date

CHILD'S NAME

FIRST

LAST

HOME #

HOME ADDRESS

GETTING TO KNOW YOUR CHILD

Please use this section to share with us any information that would help the leaders connect with and support your child.
(For example: best friend has moved, has trouble sleeping, change of custody, change of medication, etc.)

COMMENTS

CHILDREN WITH DISABILITIES

- I am aware that if my child has a disability or will be attending camp with a support worker, I need to contact summersupport@nvrc.ca as soon as possible after registration.

MEDICATIONS

- I am aware that if my child brings medication to camp, I am required to contact the recreation programmer in advance of camp.
This includes: epi-pens, in-haler or other medication

CHILD'S NAME FIRST LAST

PERMISSION FOR PICKUPS

PICK-UP POLICIES

Please sign your child in and out each day. Note on the sign-in form who will be picking your child up from the program and provide their phone number. If your child will be traveling home alone by bus or on foot, you must specify this below.

If your child is not picked up on time, we will call the people listed below, until we reach someone who is able to pick up your child. Please note we will not release your child to any person(s) for whom we do not have verbal or written permission.

PLEASE CHECK ONE:

My child has permission to sign-out at the end of the program and walk or take the bus home. (Schoolage children only)

My child will be picked up by a caregiver or parent/guardian (specified on the sign-in sheet)

MY CHILD MAY BE RELEASED BY THE FOLLOWING PEOPLE. PLEASE LIST YOURSELF AND TWO ALTERNATES (FRIENDS OR FAMILY MEMBERS)

PARENT/GUARDIAN	<input type="text"/>				
HOME #	<input type="text"/>	WORK #	<input type="text"/>	CELL #	<input type="text"/>
ALTERNATE 1	<input type="text"/>	RELATIONSHIP TO CHILD	<input type="text"/>		
HOME #	<input type="text"/>	WORK #	<input type="text"/>	CELL #	<input type="text"/>
ALTERNATE 2	<input type="text"/>	RELATIONSHIP TO CHILD	<input type="text"/>		
HOME #	<input type="text"/>	WORK #	<input type="text"/>	CELL #	<input type="text"/>

PERMISSION FOR OUTTRIPS

By checking this box, I hereby give consent to the staff of the North Vancouver Recreation & Culture Commission to take my child/guardian on outings using the following mode of transportation:

- WALKING PUBLIC TRANSIT CHARTER BUS

PERMISSION FOR SUNSCREEN APPLICATION

By checking this box, I hereby give consent to the staff of the North Vancouver Recreation & Culture Commission to apply sunscreen to the exposed areas of my child/guardian's skin should they require assistance.

I (Full Name) have completed the daycamp parental consent form on behalf of my child,

listed above, and understand that I give consent by ticking above boxes in lieu of signature, on this date

Signature of Parent/Guardian *

Consent and Release to Record, Video and/or Photograph

For Parents and Guardians of Children Under the Age of 19

DAYCAMP PARENTAL CONSENT FORM

By printing your name and signing below, you agree:

1. To grant the North Vancouver Recreation & Culture Commission (NVRC) permission to photograph or video your child (if under 19) voice, performance/or appearance participating in the program, event or activity listed above.
2. That the resulting recordings or photographs of your child will be the sole and exclusive property of NVRC and NVRC will own the copyright in any such recordings and photographs.
3. To grant NVRC permission to produce, use, publish, display and distribute the resulting recordings and photographs of your child in whole or in part in any manner and in any media, including but not limited to the NVRC website, social media platforms and printed promotional materials such as the NVRC Leisure Guide, either presently existing or created in the future, throughout the world and in perpetuity for educational, public information and promotional purposes related to any NVRC program, event or activity.
4. That NVRC may edit, modify, alter and juxtapose the recordings and photographs of your child and incorporate them either in whole or in part with or without other material, including text and other recordings or photographs.
5. To waive any right to inspect or approve the recordings and/or photographs or any derivatives of them.
6. That by signing below, you release NVRC from all claims arising out of the use of a photograph or video taken during the program, event or activity listed above, including claims of invasion of privacy.

NAME OF CHILD

NAME OF PARENT / GUARDIAN

PHONE NUMBER

Signature of Parent/Guardian *

DATE

North Vancouver Recreation & Culture Commission (NVRC) complies with British Columbia's Freedom of Information and Protection of Privacy Act (FOIPPA). Information collected on this form is used in the normal course of communication in accordance with this legislation. If you have any questions about the collection or use of this information, contact our FOIPPA Coordinator at 604-983-6306.



INFORMED CONSENT and ASSUMPTION OF RISK

For Participants under 19 Years

Dear Parent or Guardian,

Thank you for choosing to register your child in this North Vancouver Recreation and Culture Commission (“NVRC”) **Camp Program**. We request your understanding and cooperation in maintaining your child’s safety and health by reading and signing the following *Informed Consent and Assumption of Risk* form.

The *Informed Consent and Assumption of Risk* form is an agreement between the custodial parent/guardian of the child participant named below, the child participant and the NVRC. The intent of this form is to inform you and your child of the activities and expectations of our program so that the choice to participate in the program is made freely and with understanding of the associated benefits, risks and responsibilities.

PLEASE READ ALL PAGES CAREFULLY – THE TERMS CONTAINED HEREIN MAY AFFECT YOUR LEGAL RIGHTS

I, _____ (name of Parent or Guardian), am authorized and request to have _____ (my “Child”) participate in the **NVRC Camp Programs - Summer 2020** (the “Program”) offered by the NVRC.

Benefits and Risks:

The activities offered as part of the Program are designed to pose appropriate challenges for participants in both indoor and outdoor environments.

The activities include but are not limited to: hiking on flat, sloped and/or uneven terrain; running, jumping, and rolling on various surfaces (including indoor gym floors, grass, gravel, forest floor and sand), jumping from heights such as off boulders, ledges and logs; crawling and climbing over and under, swinging from natural and man-made structures, wading into creeks or ocean, participating outdoors in various weather conditions including sun, heat and rain with variable air quality; and walking outings to community parks, trails and playgrounds.

The enjoyment and education benefit derived from these activities is, in part, a result of risks inherent in these activities. The benefits of participation include developing self-confidence, physical literacy, self-esteem, and strategic problem-solving. **While NVRC attempts to minimize risk, it is neither possible nor desirable to eliminate all risk.**

I understand and agree that:

- a) the Program involves many inherent risks, which include but are not limited to the possibility of physical injury and that injuries sustained in an indoor or outdoor activity can be severe and even fatal;



- b) the Program requires a minimum level of physical, mental and emotional health (collectively ‘health’) and that my child is physically, mentally and emotionally fit to participate in the Program; and that the probability of an injury occurring depends in part on my Child’s level of fitness and health as well as on the awareness, care and skill with which my Child conducts him or herself in the Program;
- c) by choosing to have my Child participate in the program, my child and I assume the above stated potential risks, and I assume full responsibility for all damages and loss resulting from their participation;
- d) I am free to withdraw my Child from the Program at any time. I have disclosed all relevant health conditions that may affect my Child’s ability to participate in the Program to the NVRC at the time of registration;
- e) I accept that my Child must follow and obey all instructions and rules given by those responsible for or in charge of the Program, that the instructions and rules are in place to provide a safe environment for the entire group, and that failure to follow instructions and rules may result in my child’s removal from the program; and
- f) I acknowledge and agree that I have inquired about the nature of the Program and any activity that I am not completely familiar with and I have been informed of any inherent risks.

Participant’s Name (Please Print Clearly)

Parent or Legal Guardian’s Name (Please Print Clearly)

Signature of Parent or Legal Guardian

Date

COVID-19 Assumption of Risk & Permission Form

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

PLEASE READ CAREFULLY!

Program: NVRC Camp Programs - Summer 2020 (the "Program")

COVID-19 remains a worldwide pandemic and a threat to our local health and safety. We know the following (this list is not intended to be exhaustive):

1. A virus, SARS-CoV-2, may be transmitted from person to person both indoors and outdoors;
2. SARS-CoV-2 causes an illness, COVID-19, which may cause a range of symptoms, and in severe cases may be fatal;
3. There is an inherent risk of contracting COVID-19 wherever people (adults or children) are gathered in groups of any size; and
4. The virus may be transmitted by people when they do not have symptoms.

By signing this form, you acknowledge and agree as follows:

1. **Although NVRC has implemented a COVID-19 Safety Plan and related health and safety measures, there is an inherent risk of exposure to COVID-19 in any place where people, including children, are gathered in groups of any size, and this risk cannot be eliminated. Notwithstanding NVRC's COVID-19 Safety Plan and related health and safety measures, any participation in a group activity, including the Program, may result in infection with SARS-CoV-2, and sickness or death from COVID-19. You hereby assume all of the risks associated with SARS-CoV-2 and COVID-19 arising from your child's participation in the Program, and you assume full responsibility for all damages and loss resulting from such participation.**
2. North Vancouver Recreation and Culture Commission ("NVRC") will not be enforcing physical distancing between children, but will be operating the Program at a reduced capacity. Children will be permitted to play and this includes games where there will be touching (such as tag) and the use of playground equipment.
3. NVRC does not employ health professionals and does not screen for potential illness. You will not allow your child to participate in the Program or visit any NVRC facility if:
 - (a) your child or any household member is experiencing any cold or flu symptoms, or has experienced any such symptoms within the last 14 days;
 - (b) your child has been in close contact with anyone else who has had cold or flu symptoms in the last 14 days; or
 - (c) your child has been in close contact with anyone who has travelled outside of Canada in the last 14 days.

Note that if we observe any symptoms of respiratory distress or illness in your child or any person with your child, your child will not be permitted to participate in the Program.

5. As a condition of your child's participation in the Program, you hereby consent to the disclosure of your personal information, and that of your child, as NVRC deems necessary for the purposes of contact tracing.

Lastly, it is vital that we all be calm and compassionate throughout this pandemic. Any person who exhibits any aggression towards our staff or any other person in one of our facilities and/or programs will be asked to leave and not return.

If you would like more information regarding the risks associated with COVID-19 for children, please review the following BC CDC publications:

[COVID-19 Public Health Guidance for K-12 School Settings](#)

[COVID-19 Public Health Guidance for Child Care Settings](#)

Parent/guardian must initial the boxes below and sign this form. Thank you.

I/we have read, understand and agree to the Assumption of Risk and Permission Form.	INITIAL HERE
I/we have reviewed the Assumption of Risk and Permission Form with my/our child and have instructed our child to listen to and follow the instructions provided.	INITIAL HERE

Participant's Name (Please Print)

Parent/Legal Guardian's Signature

Date

**Parent/Legal Guardian's Name
(Please Print)**

Telephone Number

Email Address