



CONSENT OF PARENT OR GUARDIAN AND “ACKNOWLEDGEMENT OF RISK”

1. My child will be given the opportunity to participate in Youth Activities offered by Lacombe First Baptist Church from September 1, 2019 to September 1, 2020. This will include week day activities as well as weekend events.
2. Lacombe First Baptist Church will make every reasonable effort to ascertain that:
 - The children who undertake the program or activities will be adequately supervised
 - The location where the activity will take place is appropriate and safe.
3. “I accept the following means of transportation for any off-site activity:
Charter Transportation or Private Vehicle Transport: yes ___ no ___
4. **Potential hazards may include but are not limited to the following:**
 - a) “Transportation risks: Natural hazards associated with riding school bus charters or in private vehicles.”
 - b) Natural hazards associated with outdoor or indoor activities and any of the activities provided by Lacombe First Baptist Church.
5. I am satisfied that I have been informed of my right to obtain as much information about this program or activity as I feel necessary, including information beyond that information provided to me by Lacombe First Baptist Church to the extent that I require and am not, in any way, relying solely upon information provided by Lacombe First Baptist Church respecting the nature and extent of the risks and hazards associated with the program or activity.
6. I freely and voluntarily assume the risks and hazards inherent in the nature of the program or activity and understand and acknowledge that my child, as a participant, may suffer personal and potentially serious injury due to an unforeseeable or fortuitous event.
7. My child has been informed that he/she is to abide by the rules and regulations including directions and instructions from the church’s administrator, instructors, and supervisors as imposed on participants while participating in the program or activities. This shall include his/her participation in all of the introductory sessions and meet all prerequisites prior to his/her participation in the activity or program.
8. In the event that my child fails to abide by the rules and regulations imposed on the participant while participating in the program or activities, disciplinary action may either require that he/she not participate in the program or activity, or that I will be contacted to have him/her picked up.
9. I acknowledge that it is my responsibility to advise the Church of any medical or health concerns of my child which may affect his/her participation in the stated program or activity.
10. I consent that the church, through its employees, agents and officers at the church may secure such medical advice and services as those individuals, in their sole discretion, may deem necessary for my child’s health and safety, and that I shall be financially responsible for such advice and services.
11. Based on my understanding, acknowledgement, and consents as described herein, I agree that (child’s name) _____ has my permission to participate in this program or activity.

Date: _____ Name: _____ Signature: _____

Child’s Alberta Health care Number: _____

In case of Emergency attempt to call,... Name: _____ Phone Number _____