



TRIPS/EVENTS INFORMATION CONSENT FORM

Trip/Event Information

Type of Activity: **Beach Volleyball Camp**

Age Requirements: Grades 6-12

Description: Experienced coaching, a great mix of fun and intense drills, with emphasis on skill development and character development.

Staff / Volunteer Supervisor(s): Marvin McMurray

Volunteers: Kendra Kennedy, Hope Herfst

Means of Transportation: (Bus company, Volunteer drivers): N/A Location: Whytock Park, Madoc, ON (old lawn bowling field)

Departure Location/Date/Time: Daily, Aug 12-16. 6 PM, Whytock Park

Return Location/Date/Time: Daily Aug 12-16. 9 PM, Whytock Park.

* Parent / Guardian are expected to arrange drop-off and pick-up of student.

Cost Per Student: \$10 per day or \$40 per week

Payment Due Dates: August 12, 2019

Payment Options:

1. Online: www.qyfc.com - Visa or MasterCard (Mail permission from separately)
 2. Hand permission form and payment to Youth Unlimited Director directly (contact information below).
 3. Mail payment and permission form to Quinte Youth Unlimited P.O. Box 233, Belleville, ON, K8N 5A2
 4. Drop off Form & Payment at the Centre Hastings Youth Unlimited office: 135 Elgin St. Madoc, ON (by appointment only)
- *NOTE: If paying by cheque: please make it payable to: "Quinte Youth Unlimited"

Emergency Contact & Medical Information:

Participant Name: _____ D. of B. (m/d/y): _____ OHIP #: _____

Parent / Guardian Name: _____

Parent / Guardian Home Phone #: _____ Work #: _____ Cell #: _____

Alternate Emergency Contact Name: _____ Phone: _____

Family Doctor Name: _____ Phone: _____

Are there any medical or behavioural concerns which might affect this student's comfort or safety during this activity? (Allergies, medical conditions, medications, behavioural issue, etc.) Yes or No

If yes, please explain below. If necessary contact the staff/volunteer supervisor through the contact information given for Youth Unlimited below to discuss details.

Elements of Risk Notice:

The risk of injury exists in every trip/event. Falls, collisions and other incidents may occur and cause injury. Due to the very nature of some activities, the risk of injury may increase. Injuries may range from minor sprains and strains to more serious injuries affecting the head, neck or back. Some injuries can lead to paralysis or prove to be life threatening. The chances of an injury occurring can be reduced by carefully following instructions at all times while engaged in the activity. Youth Unlimited attempts to manage as effectively as possible the risk involved for students while participating in its trips/events.

Examples of risk in the particular activity are:

Scrapes, Bruises, Sprained Ankles or Wrists

Release of Liability

I, the parent or guardian named above, give consent for Quinte Youth Unlimited and the staff/volunteer supervisor named above to sign consent for emergency medical treatment and to authorize any physician or hospital to provide a medical assessment, treatment or procedures for my child, understanding that Youth Unlimited will do everything in their power to contact me in case of medical or other emergency.

I have read and understand the Elements of Risk Notice. I hereby acknowledge and accept the risk inherent in the requested activity. I agree that Quinte Youth Unlimited, its trustees, directors, corporation members, servants, agents, volunteers and employees shall not be liable for an injury to my child or loss or damage to personal property arising from, or in any way resulting from participating in the above listed activities.

I also give permission for pictures or videos that may include my child to be used for future promotion of this trip.

I also give permission for my child to ride in the vehicle of any volunteer driver(s) designated by the staff / volunteer supervisor(s).

I hereby give consent for my child to participate in this YU trip/event.

Parent/Guardian Signature _____

Date: _____