



# Canada's Wonderland

## WEDNESDAY AUGUST 21 2019

### DETAILS:

Quinte Youth Unlimited invites youth on a summer adventure to one of Canada's top attractions! Various options are available if you have a seasons pass or if you would rather eat funnel cake for dinner. We plan to leave at 8:30am from QYU Youth Centre (444 Dundas St West Belleville) and return at midnight (12am) to the same place we started. Questions? Text us at 613-242-6733

### OPTIONS:

- \$20 Bus
- \$40 Wonderland Ticket
- \$10 All you can eat pizza dinner!
- \_\_\_ TOTAL

### PAYMENT:

1. Online: Pay with credit card at [www.QYU.ca/pay](http://www.QYU.ca/pay)
2. Office: Pay with cash or cheque at the QYU office:  
444 Dundas St West Belleville
3. Other: Ask us about other payment options

**FORM:** Print and return this form to QYU along with payment by **August 9, 2019.**

Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Postal \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Emergency Phone \_\_\_\_\_

Doctors Name \_\_\_\_\_ Phone \_\_\_\_\_ OHIP \_\_\_\_\_

Allergies or special medical problems: \_\_\_\_\_

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. 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.

I, the parent or guardian named above, 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 representative 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, the parent or guardian named above, understand that Youth Unlimited will do everything in their power to contact me in case of medical or other emergency, and 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, if the undersigned is unable to be reached.

I hereby give consent for my child to participate in this Youth Unlimited trip/event. 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).

Participants Name \_\_\_\_\_ Parents Name \_\_\_\_\_

Participants Signature \_\_\_\_\_ Parents Signature \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_