

2021/2022 Vegreville Programs Waiver/Release Form

Note: This is a blanket waiver for all programs your child may participate in at the Library in 2021. Each year you will be required to fill out a new waiver. Some special programs/events may require additional waivers due to the nature of the program/event.

I, _____, being the parent/guardian, of _____ do hereby acknowledge the risk of injury inherent in the activities of the programs my child will be participating in (hereinafter referred to as 'Programs'). I agree that my child will be participating in Programs upon the clear understanding that they do so entirely at their own risk. I hereby agree that I shall indemnify and save harmless Northern Lights Library System, the Town of Vegreville, Vegreville Centennial Library, Vegreville Family Resource Network, Mental Health Capacity Building as well as their Boards or Governing Councils, members, staff and volunteers against all claims, damages and expenses that relate to my child who may be injured while participating in Programs.

The Programs staff reserve the right to refuse or terminate participation at any time at their discretion.

In keeping with the FOIP (Freedom of Information and Protection of Privacy) Act of Alberta, all participants of any program under eighteen years of age must receive parental permission to:

- Have their photographs, names, and stories published by the Organization running the Programs.
- Have their crafts/projects or written work displayed by the Organization running the Programs.

I, parent/guardian of the above-mentioned child do do not give my permission for their photograph, name and/or stories to be published by the Organization running the Programs and for their crafts/projects or written work to be displayed.

I give my consent for staff or volunteers of the Programs to call a medical practitioner or ambulance for my child in the event of an accident or illness of a serious nature.

By signing this waiver and release form, I acknowledge that I have read and understood its conditions.

Parent/Guardian Signature

Date

Printed Name

Witness Signature

Please fill in reverse

2021/2022 Vegreville Programs Registration Form

Note: This is a blanket registration information form for the 2021/2022 year.
To register for any programs, you will still need to register as stated in the program advertising.
Your child may participate in any drop-in programming for their age group.

Participants Name: _____

Age: _____

Address: _____

Phone #: _____

Parent/Guardian Name: _____

Contact #: _____

Emergency Contact Name (other than parents): _____

Emergency Contact Phone #: _____

Please indicate below any allergies or health conditions that you feel the staff should be aware of, especially if special foods and/or physical activities may adversely affect the health of your child.

Note: Participants should not attend programs if they are experiencing symptoms of any type of illness.