



Emergency Contact, Liability and Consent Form

Please read, fill out and sign this form as indicated.

Session:	July 14 – 15	August 2 – 12				
	July 18 - 29	August 15 – 26				
CANSail:	1	2	3	4	5	6
	Other Session/Course _____					

Participant's First Name _____ Last Name _____ Date of Birth _____

Full Address _____ Postal Code _____

Email _____ Phone # _____ Cell # _____

Emergency Information

(Must be different than above)

Care Card _____

Contact 1 _____ Phone 1 _____ Cell 1 _____

Contact 2 _____ Phone 2 _____ Cell 2 _____

Does the participant have any allergies or take any medications? Yes No

Does the participant have any medical conditions? Yes No

If YES for any of the above, please specify.

Please note: Staff cannot provide personal care or administration of medication. When appropriate, staff may be able to provide assistance with the administration of medication in emergency situations. The standard response in the event of an emergency is to call 911 and then the parent/guardian. Information on this form may be provided to EMS personnel.

If participant is under 19 years of age:

I grant permission for the student to leave the premises **without** the supervision of an instructor. Yes No

I grant permission for any photographs of the participant to be displayed on the Hollyburn Sailing Club website, in promotional materials, and on social media. Yes No

The student will return home by: Walking/Self Public Transit Being Picked Up

Is there anyone NOT allowed to pick up the student? Yes No _____
Name

RELEASE OF LIABILITY, HOLD HARMLESS, AND INDEMNITY AGREEMENT

In consideration of the British Columbia Sailing Association and the Hollyburn Sailing Club allowing the participant to participate in courses noted on this application, I, on behalf of myself or the participant, hereby release the Host venue, BC Sailing Association, Hollyburn Sailing Club, and their respective officers, directors and members, any volunteers, parents of other children, and other participants from any claims or causes of action that may arise as a result of the participant's participation. This includes demands in respect to death, injury, loss, or damage to the participant's property, howsoever caused, arising out of or in connection with the participant taking part in this course notwithstanding that the same may have been contributed to or caused or occasioned by the negligence of the same bodies, or any of them, or their agents, officials, servants, or representatives. I acknowledge that by participating in this course, the participant may be subjected to risks of injury of every nature. The participant's activities may include the maneuvering of a boat or other watercraft in deep waters and in potentially hazardous conditions which could include, among other risks, cold water temperatures with exposure to hypothermia, strong winds and high waves, sudden and unexpected immersion in deep waters, collision with other watercraft or their parts, or stationary objects such as docks, pilings, water outfalls and buoys. In the event of the participant, other family members or anyone on behalf of the participant should attempt to pursue any claim against any of the released parties, I hereby agree to hold harmless and to indemnify such parties from any and all claims that may be brought against them including actual attorney's fees or costs that may be incurred in defending such claims. **I accept responsibility for the participation of the participant and agree that it is my responsibility to determine whether the participant should be participating. I also agree that the participant is bound by the rules, which may govern their participation in this event.**

This Release, Hold Harmless and Indemnity Agreement are intended by me to be without exception. It applies to any and all claims that might arise under any theory of liability.

I have honestly disclosed all of the information requested in the questions; and I understand that withholding any information may contribute to injury or illness complications, and possibly compromise the care provided in the event of an emergency. If any of the above information changes prior to or during the program, I will immediately notify the Head Coach or Training Director. I also understand that the staff of the Hollyburn Sailing Club reserves the right to determine whether a specific camp is suitable for the participant.

Participant Name _____ Signature _____ Date _____

Parent/Guardian Name _____ Signature _____ Date _____