



## Land Based Learning Participation Consent Form

**Trip Departure Date and Time:**

**Trip Return Date and Time:**

**Destination:**

**Description of Activities:**

**Transportation Arrangements:**

**PARENT/GUARDIAN AUTHORISATION - PLEASE COMPLETE**

Please complete and return this form to WSÁNEĆ Leadership Council as soon as possible before the activity.

**PARTICIPANT NAME:** \_\_\_\_\_

- YES, I have been provided with sufficient information about the above planned field trip and give consent for my child to attend.
- My child DOES require a booster seat, which I will provide at drop-off.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please list any medical concerns: \_\_\_\_\_

OPTIONAL: Medical Service Plan # \_\_\_\_\_

It is recommended that participants carry personal identification for all field trips.



## Land Based Learning Release of Liability, Waiver of Claims, Assumption of Risks and Indemnity Agreement

### PARTICIPANT NAME:

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_  
Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

**To:** **WSÁNEĆ Leadership Council** and their directors, managers, officers, employees, agents, representatives, successors and assigns (all of whom are hereinafter referred to as (“**the Releasees**”))

### RISKS OF ACTIVITIES

I have chosen to **allow my child to participate in activities hosted by WSÁNEĆ Leadership Council (“WLC Activities”)**. Such activities may include physical activities and/or outdoor activities in remote locations with limited access to services, including communication and emergency services. I understand that the WLC Activities may include physical activities or activities on the water, which can involve exposure to the elements and risks of injury including but not limited to: weather conditions, wet and slippery surfaces, tripping hazards, and encounters with wild animals. I understand that in the event of an accident or injury, access to and communication with emergency services may be difficult or delayed.

### ASSUMPTION OF RISKS

I hereby freely assume the inherent and all other risks described above and any harm, injury, death or loss, known or unknown, that may occur to my child or to my property as a result of participation in WLC Activities, including any caused by the negligence of the Releasees.

### RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

In Consideration of the RELEASEES permitting my child’s participation in WLC Activities and permitting my child’s use of their services, equipment and other facilities, and for other good and valuable consideration, the receipt and sufficiency of which is acknowledged, I hereby agree as follows:

1. TO WAIVE ANY AND ALL CLAIMS that I have or may in the future have against the RELEASEES AND TO RELEASE THE RELEASEES from any and all liability for any loss, damage, expense or injury, including death, that my child may suffer or that I may suffer, as a result of my child’s participation WLC Activities DUE TO ANY CAUSE WHATSOEVER, DIRECTLY OR INDIRECTLY, INCLUDING NEGLIGENCE, BREACH OF CONTRACT,

OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, ON THE PART OF THE RELEASEES.

2. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES for any and all liability for any property damage, loss, expense or personal injury to any third party resulting from my child's participation in WLC Activities, including, but not limited to all costs of medical attention or health care costs rendered to my child, or for my child's benefit, as a result of my child's participation in WLC Activities.

I FREELY ACCEPT AND FULLY ASSUME ALL SUCH RISKS, DANGERS AND HAZARDS AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, PROPERTY DAMAGE OR LOSS RESULTING THEREFROM	INITIALS
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3. This Release Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives, in the event of my death or incapacity;
4. This Release Agreement and any rights, duties and obligations as between the parties to this Release Agreement shall be governed by and interpreted solely in accordance with the laws of the Province of British Columbia and Canada; and
5. Any litigation involving the parties to this Release Agreement shall be brought solely within the Province of British Columbia and shall be within the exclusive jurisdiction of the Courts of that province.

ACKNOWLEDGEMENT AND ACCEPTANCE: I have read and understood this Release Agreement and agree that by signing this document, I have given up certain legal rights which I or my heirs, executors, administrators, assigns and representatives may have against the Releasees. In entering into this Release Agreement, I am not relying on any oral or written representations or statements made by the Releasees with respect to the WLC Activities. I understand that I have the right to seek legal advice before executing this Release Agreement.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 2022.

\_\_\_\_\_  
Participant Name

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Parent/Guardian Signature

Hannah Morris  
\_\_\_\_\_  
Witness Name

\_\_\_\_\_  
Witness Signature

250-815-0295  
\_\_\_\_\_  
Witness Phone Number

800 b Stelly's Cross rd  
\_\_\_\_\_  
Witness Mailing Address