

INFORMED CONSENT FORM FOR USE OF BLSC FACILITIES

2017

The _____ is arranging
(name of event or group or individual participants)

(Description of activity and dates)

THIS FORM MUST BE READ AND SIGNED TO ATTEND AND PARTICIPATE IN ACTIVITIES AT BLSC

ELEMENTS OF RISK:

Recreational and social activity programs, such as those offered at BLSC, involve certain elements of risk. Injuries may occur while participating in these activities. The following list includes, but is not limited to, examples of the types of injury which may result from participating in sailing, racing, other forms of boating, swimming, camping, social activities and any other on land and/or on water activities available at BLSC.

1. minor injuries such as cuts or burns
2. major injuries such as fractures
3. accidental death or drowning

The risk of sustaining these types of injuries result from the nature of the activity and can occur without any fault of either the participant, or the BLSC, its' directors/agents or the GRCA where the activity is taking place. By choosing to take part in this activity, you are accepting the risk that you/your child may be injured.

The chance of an injury occurring can be reduced by carefully following instructions and taking prudent safety precautions at all times while engaged in the activity. Weather is unpredictable and there is no rescue service at BLSC. The BLSC encourages all participants to use a Transport Canada approved floatation device at all times when on or near the water.

If you choose to participate in activities at BLSC you must understand that you bear the responsibility for any injury that might occur.

The BLSC does not provide accidental death, disability, dismemberment or medical expense insurance on behalf of anyone participating in any activity.

ACKNOWLEDGEMENT

I/WE HAVE READ THE ABOVE. I/WE UNDERSTAND THAT IN PARTICIPATING IN THE ACTIVITY DESCRIBED ABOVE, I/WE ARE ASSUMING THE RISKS ASSOCIATED WITH DOING SO.

Signature of Participant/Group Rep: _____ Date: _____

Signature of Participant/Group Rep _____ Date: _____

signature of participants- continue list on back of form if not enough room)

PARENTAL PERMISSION

I give _____ permission to participate _____
(name of minor children- continue list below if not enough room)

Signature of Parent/ Guardian: _____ Date: _____