

# Informed Consent & Permission Form: Youth Fitness Centre Access

Mayne Island Community Centre  
493 Felix Jack Road, Mayne Island, BC. V0N 2J2

## Informed Consent Waiver, Release, and Indemnity Form

**BY SIGNING THIS DOCUMENT, YOU AND YOUR CHILD'S LEGAL RIGHTS MAY BE AFFECTED.**

***PLEASE READ CAREFULLY!***

Mayne Island Community Centre requires completion of this document by a parent or legal guardian prior to participation as a reminder and confirmation of their duty to inform themselves of the risks normal to the activity they have chosen for the youth (13–17 years) participant and of their responsibility to carefully consider those risks against their personal knowledge of the ability and experience of the youth. This is for the protection of the youth participant, other participants, and the Community Centre.

Youth may visit the Mayne Island Community Centre's Fitness Centres provided that:

- I. They are 13 years or older. Proof of age may be required.
- II. They are members of the Mayne Island Community Centre Society.
- III. They comply with Mayne Island Community Centre Fitness Centre policies.
- IV. Youth 13 - 15 years of age must attend a Fitness Centre orientation. Youth 16 - 17 years of age do not have to attend an orientation provided they have previous weight training experience.

**IMPORTANT:** Submit all completed forms prior to your first visit to the reception desk at the facility of your choice.

### **PARENT AND/OR LEGAL GUARDIAN TO INDEMNIFY AND SAVE HARMLESS:**

The parent or guardian shall indemnify and save harmless, the Mayne Island Community Centre Society (MICCS) Members, MICCS Directors, and the Facility from and against any and all losses, claims, actions, damages, liability, costs or expenses, including legal fees, on an indemnity basis, claims for personal injury or death, property damage, or any other loss or damage arising out of the youth's participation in any MICCS fitness centre program or activity.

### **PARENT AND/OR LEGAL GUARDIAN TO RELEASE AND WAIVE CLAIMS:**

That on behalf of myself, my heirs and assigns, assume full responsibility for their participation. I hereby waive any and claims against the Mayne Island Community Centre Society, their members, their directors, their employees and authorized agents and release and discharge them, their successors and assigns, from any and all actions, causes of action, claims and demands which may arise out of any incident, accident, or other occurrence that may result in personal or bodily injury, loss of life, property loss, or any other damages to any person.

### **A. PARTICIPANT INFORMATION:**

<b>First name:</b>	<b>Last name:</b>		
<b>Address:</b>		<b>Postal Code:</b>	
<b>Phone Number:</b>	<b>Date of Birth (yyyy-mm-dd)</b>		<b>Age</b>

## PARENT OR GUARDIAN

<b>First name:</b>	<b>Last name:</b>
<b>Phone Number:</b>	
<b>Email Address:</b>	

## PARTICIPANT

Do you have previous experience strength training?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, from where or with whom? (e.g. sport coach, school, personal trainer, etc.):	

*If you responded "no" to the above, please contact the facility of your choice to book an orientation prior to your first visit.*

<b>PARTICIPANT</b> I/we have read, understand and agree to the Informed Consent and Permission Form.	INITIAL HERE
<b>PARENT OR GUARDIAN</b> I/we have reviewed the Informed Consent and Permission Form with my/our child and have instructed my/our child to listen to and follow the instructions provided.	INITIAL HERE

<b>Signature of Parent/Guardian:</b>
<b>Date (yyyy-mm-dd):</b>