



Kildonan Youth Activity Centre
Image Release Form

This release is for the use of all members of the Kildonan Youth Activity Centre. It will remain in effect from the time of signing until the participants reach the age of majority. This information will be kept on file with the Kildonan Youth Activity Centre. To change consent you must complete a new Image Release Form.

Parent(s)/Guardian(s): Sign this release for KYAC participants under the age of majority.

Participant's Name: _____

Birth Date: _____

In the course of activities, representatives of the Kildonan Youth Activity Centre, participants, and staff may take photographs or otherwise record events. These photographs and recordings are sometimes used to promote programming. Please advise us if you are willing to have your child/ward's image and voice used for promotional purposes by KYAC, as indicated below:

I, on behalf of my child/ward, give permission to the Kildonan Youth Activity Centre to photograph and record my child/ward's image and voice on still photographs, motion picture film, audio tape, video tape or digital media and to use this material, and/or similar material provided to KYAC by me or third parties involved in youth events, in whole or in part, now and in the future, through the media of television, film, Internet, multi-media presentation, radio, audiotape, videotape, in printed and display form for the promotion of KYAC.

I, on behalf of my child/ward assign and transfer to the Kildonan Youth Activity Centre any and all proprietary rights, including copyright, and waive all personality rights, which my child/ward may have in this material.

The Kildonan Youth Activity Centre is only responsible for official uses of photographs and recordings. Any personal uses by Staff, Participants, and non-participants outside of the promotional uses outlined above are not monitored by or the responsibility of KYAC.

NOTE: It is mandatory that you complete this section. Please check and sign to confirm your selection.

I, on behalf of my child/ward:

C Give my permission as set out above

C DO NOT give my permission as set out above

Name of Parent/Guardian

Signature of Parent/Guardian

Relationship to Child/Ward

Date

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Kildonan Youth Activity Centre
Participant Registration information
~ Confidential ~

It is the responsibility of the parent and/or participant to notify the program supervisor of any changes to the following information.

Please Print

Last Name: _____ First Name: _____

Date of Birth (MM/DD/YYYY): _____ Phone #: _____

Address: _____ Postal Code: _____

Parent/Guardian Names: _____

Phone # - Home: _____ Work: _____ Cell: _____

Alternate Contact: _____ Phone #: _____

Relationship to Participant: _____

Medical Information:

Manitoba Health # (6 digits): _____

Personal Health I.D. # (9 digits): _____

Blue Cross # (if applicable): _____

Do you have any severe allergies that require the use of an Epi-Pen? Yes ___ No ___

Indicate any other information you feel we should be aware of (ex: medications, allergies, etc.)

Parent Signature: _____ Date: _____

Participant Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

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Kildonan Youth Activity Centre Informed Consent Agreement

I, the undersigned, hereby acknowledge that certain **risks of injury are inherent to participants in sports and recreational activities**. These types of injuries may be minor or serious, and may result from one's own actions, the actions or inactions of others, or a combination of both.

I understand that certain **rules and regulations are designed for the safety and protection of participants** and hereby undertake to abide by these rules and regulations set by KYAC.

I understand that **certain activities require a minimum level of health and fitness** (physical, mental, and emotional) and that each person has a different capacity for participating in these activities. In addition, **I recognize my own personal limits** and will not push myself beyond these limits. Participants are responsible for choosing only those activities that meet their individual skill levels.

I agree that the **Kildonan Youth Activity Centre, or its staff members shall not be liable** for any injury to my person, or loss or damage to my personal property arising from, or in any way resulting from, my participation in these activities, unless such injury or damage is caused by the carelessness of the Kildonan Youth Activity Centre, or staff members.

I also hereby recognize that the Kildonan Youth Activity Centre is operated on a **drop-in basis** and only those participants and their guardians who are comfortable with this type of setting need participate. KYAC staff **are not responsible for keeping participants on the premises** if they so choose to leave and do not take responsibility for their actions or safety once they have left the specified area.

I am also aware that **KYAC staff reserves the right to ask participants to leave** if they are disrupting the group or not following any of the KYAC rules and regulations set-out in this information package.

Parent Signature: _____ Date: _____

Participant Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

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KILDONAN YOUTH ACTIVITY CENTRE RULES AND REGULATIONS

- ✓ The **use of alcohol or narcotics will not be tolerated**. No one under the influence of drugs or alcohol is allowed on the premises.
- ✓ Causing wilful **damage, destruction, defacement, or improper use of the Centre's property** will not be tolerated.
- ✓ There will be **no fighting allowed** on the premises or surrounding school grounds. This will include rough play where a warning has been issued.
- ✓ **Profane language or obscene gestures** will not be tolerated.
- ✓ Youth members are **not permitted to loiter in the halls or washrooms**, and are not allowed in any other parts of the building unless under direct supervision.
- ✓ Members will require **proof of age and identification**.
- ✓ Gang identification will not be tolerated.
- ✓ **Rollerblades, skateboards, and bicycles will not be used in the building**. Skateboards will be taken upon entering the building and held by KYAC staff until participant wishes to leave.
- ✓ Disrespect for yourself, others, and property will not be tolerated.
- ✓ The KYAC **office telephone is for emergency use only**. Permission *may* be granted for those participants needing to make arrangements for rides home.

Any unusual incidents not covered in the rules and regulations list will be dealt with by the supervisor working at the time. The supervisor has the authority to ask anyone to leave who fails to act according to the rules and regulations. In the case of serious offences, both parents and police will be notified at once. Staff may use their discretion upon individual circumstances where a participant may be asked not to return to the program for a number of days or weeks. In the event that such a circumstance arises, participants will be notified of a date upon which they may return.

Keep this page for your reference