

Participants Acknowledgement of Risks and Release



- Camp Seahorse (July 5-8) at Sherbrooke Lake Camp
- Camp Coyote (August 9th-12th) at Camp Mockingee)
- Cape Breton Summer Camp (August 19-22) at Camp Carter

Name of Participant (You may use preferred name as per registration form)

Date of Birth: _____

The youth and his/her parent(s) or guardian(s) (collectively the “Undersigned”) understand the nature and inherent hazards and risks of the intended activities related to the trip described below (hereinafter referred to as the “Camp”).

The Undersigned acknowledges that engaging in this Camp may require a degree of skill and knowledge and that the youth has responsibilities as a participant.

When activities involve arduous physical activity, participants will have the choice to opt out of this programming. The Undersigned certify that the youth is fully capable of participating in the Camp and/or acknowledge that it is the participant’s responsibility to notify leaders if there are activities that they are not able to participate in. The Undersigned accept full responsibility for any injuries or illnesses that the applicant may suffer during the trip, including, but not limited to, those resulting from any pre-existing medical condition.

The Undersigned fully understand and appreciate the risk of injury, illness, property loss or theft, and even death inherent in the Camp. It is further understood that unforeseen circumstances may arise and The Youth Project shall not be held responsible for such circumstances or the consequences thereof. Notwithstanding the foregoing, nothing contained herein shall excuse The Youth Project, and its employees or volunteers from responsibility for its or their negligence or willful misconduct during the course of the trip.

The Camp may take place in a wilderness environment and may include but is not limited to: hiking, sports, swimming in lakes, biking, canoeing, fire building and orienteering.

In addition to the hazards and risks described in the paragraph above, the hazards and risks of the Camp may also include, but are not limited to, the following: latent or apparent defects or problems in equipment provided by The Youth Project or outside service providers, acts of other participants in the Camp (including from the failure of other participants to follow instructions or obey safety regulations), weather conditions (including unforeseen, inclement or intemperate weather), consumption of food and drink, fire, first aid, emergency treatment, or other services rendered. Further, The Youth Project will not always have medical personnel (other than instructors that are certified in first aid) at the location of the Camp.

NOW THEREFORE, IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN THIS ACTIVITY, THE UNDERSIGNED ASSUMES ALL RISKS AND ACCEPTS FULL RESPONSIBILITY SURROUNDING THE YOUTH’S

PARTICIPATION IN THE ACTIVITIES, THE TRANSPORTATION RELATED TO THE TRIP AND ANY ACTIVITY UNDERTAKEN AS AN ADJUNCT THERETO, WHICH RISKS AND RESPONSIBILITY INCLUDE FOR BODILY INJURY, DEATH OR LOSS OF OR DAMAGE TO PERSONAL PROPERTY AND EXPENSES AS A RESULT OF THOSE INHERENT RISKS AND DANGERS IDENTIFIED HEREIN AND THOSE INHERENT RISKS AND DANGERS NOT SPECIFICALLY IDENTIFIED, OR AS A RESULT OF THE YOUTH'S NEGLIGENCE IN PARTICIPATING IN THIS CAMP, AND THE UNDERSIGNED HEREBY WAIVES, RELEASES AND ABSOLVES AND AGREES TO INDEMNIFY AND SAVE HARMLESS THE YOUTH PROJECT AND ITS EMPLOYEES AND VOLUNTEERS OF AND FROM ANY AND ALL LIABILITY ARISING THEREFROM, EXCEPT SUCH AS SHALL ARISE FROM ITS OR THEIR NEGLIGENCE OR WILFUL MISCONDUCT.

The Undersigned have carefully read, clearly understand and accept the terms and conditions stated herein and acknowledge that this PARTICIPANTS ACKNOWLEDGEMENT OF RISKS AND RELEASE shall be effective and binding upon each of the Undersigned, and their respective heirs, successors, assigns, personal representatives, estates and for all members of the student's family.

Do you give consent for photos and video taken on the subject trip to be used by The Youth Project for promotional purposes?

YES NO

The authorization shall remain effective until revoked in writing and delivered to The Youth Project.

Signature of Youth: _____ Date: _____

Signature of Parent or Guardian: _____ Date: _____

If you have any questions or concerns regarding Camps, please contact us by phone or email at (902)429-5429 or youthproject@youthproject.ns.ca