PARENTAL CONSENT, DISCLOSURE AND ACKNOWLEDGEMENT OF RISK



I am aware that my child will be participating in an educational canoeing, kayaking or stand-up paddle-boarding course, training or related activity (the "Paddlesports") through Paddle Canada/Pagaie Canada.

I am aware that participation in the Paddlesports involves risks, dangers and hazards including, but not limited to: rolling over or sinking of the vessel, whether intentional or unintentional; water hydraulics, rapids, currents, swells, waves, water/wetness, debris, cold weather, cold water, lightning or other natural forces; camping, animal attacks, portaging or other similar activities such as but not limited to general land activities that involve walking/hiking around before, during or after the course on uneven ground, slippery rocks, or varied terrain; my child's negligence or the negligence of others.

I am aware that the risk of injury from the activity and equipment used in the Paddlesports, swimming and related land and water activities is significant and includes the potential for broken bones, drowning, injuries related to exposure to natural elements, contagions and man-made pollutants, severe injuries to the head, neck and back, or other bodily injuries that may result in permanent disability or death.

I have reviewed with my child the importance of being safe while participating in the Paddlesports including wearing a personal flotation device at all times while in a canoe or kayak or on a stand-up paddle-board and following the rules and directions of Paddle Canada /Pagaie Canada guides/instructors and other staff.

My child does not have any health conditions which would prevent him/her from participating in the Paddlesports.

I give my permission to Paddle Canada/Pagaie Canada guides/instructors to provide medical care or arrange for medical care to be provided to my child during the Paddlesports, should they deem it appropriate. I understand and agree that I am fully responsible for all costs of medical care including rescue, provided to my child, arising from the Paddlesports.

I hereby confirm that I have read and understood this document prior to signing it and agree that this document will be binding upon my, my heirs, executors and assigns.

Name of child:			
Name of Parent/Guardian (Print):			
Signature of Parent/Guardian:			
Address:			
City:	Province:	Postal Code:	
Telephone Number:	Date:		

www.paddlecanada.com / 1-888-252-6292 / PO Box 126, Kingston, ON, K7L 4V6