

**CONSENT, ASSUMPTION OF RISKS & RELEASE**



**Child(ren) who will attend at a B.C. Family French Camp:**

Name	Date of Birth

Names of Parent(s) who will attend at a B.C. Family French Camp with their child: \_\_\_\_\_

Home Address: \_\_\_\_\_

**Camp to be attended:**     Okanagan Week 1                       Gwillim Lake                       Vancouver Island Week 1  
 (check one)                       Okanagan Week 2                       Vancouver Island Week 2

**Are there any physical, mental or other disabilities or limitations that would limit Parent(s) from fully participating in Camp programs including, driving a motor vehicle and supervising any outdoor activities? If yes, please explain.**

**Has Parent(s) ever been convicted of a criminal offense involving minors?**

**If Parent(s) is bringing a motor vehicle to Camp, is the vehicle insured for public liability losses and claims with coverage of not less than \$2,000,000 per occurrence? Name of Carrier:**

The undersigned Parent(s) hereby acknowledge:

I/we am aware that swimming, boating, hiking, participating in outdoor games and other camp activities (hereinafter collectively referred to as the "ACTIVITIES") involve many risks, dangers and hazards including, but not limited to: drowning; changing weather conditions; loss of balance or control; changing water conditions; loss of body heat in cold water; being struck by a sporting object such as a ball or arrow; rocks, stumps or other obstacles encountered in hiking; falling from a cliff; stings from stinging insects; variable and difficult conditions; streams, creeks, and rivers encountered in hiking; the failure to act safely or within one's own ability; getting lost by failing to stay a group; negligence of other campers, parents, hikers and other persons; and **NEGLIGENCE ON THE PART OF B.C. FAMILY FRENCH CAMP OR ITS STAFF, INCLUDING THE FAILURE ON THE PART OF B.C. FAMILY FRENCH CAMP OR ITS STAFF TO SAFEGUARD OR PROTECT ME/US AND MY CHILD(REN) FROM THE RISKS, DANGERS AND HAZARDS OF THE ACTIVITIES.**

**I/WE AM AWARE OF THE RISKS, DANGERS AND HAZARDS ASSOCIATED WITH THE ACTIVITIES AND I FREELY ACCEPT AND FULLY ASSUME ALL SUCH RISKS, DANGERS AND HAZARDS AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, PROPERTY DAMAGE AND LOSS RESULTING THEREFROM.**

**WITH THE FOREGOING AWARENESS, I/WE HEREBY CONSENT TO THE ATTENDANCE OF MY CHILD(REN) NAMED ABOVE AT THE B.C. FAMILY FRENCH CAMP DESCRIBED ABOVE FOR THE WEEK DESCRIBED ABOVE AND TO THE PARTICIPATION BY SUCH CHILD(REN) IN ALL ACTIVITIES AND PROGRAMS OF THE B.C. FAMILY FRENCH CAMP.**

**I/WE AGREE THAT IF I/WE AM SUFFERING FROM ANY PHYSICAL, MENTAL OR OTHER DISABILITIES OR LIMITATIONS THAT WOULD LIMIT ME/US FROM FULLY PARTICIPATING IN CAMP PROGRAMS INCLUDING, DRIVING A MOTOR VEHICLE AND SUPERVISING ANY OUTDOOR ACTIVITIES, I/WE WILL REFRAIN FROM SUCH PARTICIPATION.**

In consideration of B.C. Family French Camp allowing my child(ren) and me/us to attend at a camp, I/we agree on behalf of myself/ourselves and on behalf of our child(ren) as follows:

- (i) TO WAIVE ANY AND ALL CLAIMS that I/we and my/our child(ren) have or may in the future have against B.C. Family French Camp, and its directors, officers, employees, agents, representatives, sponsors, successors and assigns (all of whom are hereinafter collectively referred to as "THE RELEASEES"), and TO RELEASE THE RELEASEES from any and all liability for any loss, damage, expense or injury including death that I/we and our child(ren) may suffer, or that my next of kin may suffer resulting from either my/our use of or my child(ren)'s use of and attendance at a B.C Family French Camp, DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, INCLUDING ANY DUTY OF CARE UNDER THE OCCUPIERS LIABILITY ACT, R.S.B.C. 1996, c.337, ON THE PART OF THE RELEASEES, AND ALSO INCLUDING THE FAILURE ON THE PART OF THE RELEASEES TO SAFEGUARD OR PROTECT ME/US AND OUR CHILD(REN) FROM THE RISKS, DANGERS AND HAZARDS OF THE ACTIVITIES REFERRED TO ABOVE;
- (ii) TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any damage to property of or personal injury to any third party, resulting from my/our use or my child(ren)'s use of or presence at a camp facility operated by B.C. Family French Camp;
- (iii) This Agreement shall be effective and binding upon my/our heirs, next of kin, executors, administrators, assigns and representatives, in the event of my death or incapacity;
- (iv) This Agreement shall be effective and binding upon my/our child(ren)'s heirs, next of kin, executors, administrators, assigns and representatives, in the event of my child(ren)'s death or incapacity; and
- (v) Any litigation involving the parties to this Agreement shall be brought solely within the Province of British Columbia and shall be within the exclusive jurisdiction of the Courts of the Province of British Columbia.

I/we hereby represent, warrant and covenant with B.C. Family French Camp that all of the information provided in this Consent, Assumption of Risks and Release and in the accompanying Medical History form is true and complete in all respects. I/we hereby acknowledge that B.C. Family French Camp is relying on the foregoing representation, warranty and covenant in granting permission to the me/us and my/our child(ren) to attend a B.C. Family French Camp.

I/we understand that from time to time, photos of camp activities may be published on the BCFFC website for the purpose of promotion and that those images could contain photos of my family members.

I/we have read, understand and agree to abide by the Policies of B.C. Family French Camp as attached to this Consent, Assumption of Risks and Release.

DATED at \_\_\_\_\_, British Columbia this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_

SIGNED, SEALED AND DELIVERED in the presence of: )  
 \_\_\_\_\_ )  
 Name \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 Address \_\_\_\_\_ ) *Signature of Parent*  
 \_\_\_\_\_ )  
 Occupation \_\_\_\_\_ ) Name of Parent: \_\_\_\_\_

SIGNED, SEALED AND DELIVERED in the presence of: )  
 \_\_\_\_\_ )  
 Name \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 Address \_\_\_\_\_ ) *Signature of Parent*  
 \_\_\_\_\_ )  
 Occupation \_\_\_\_\_ ) Name of Parent: \_\_\_\_\_