

# Sinkunia Community Development Organization

## Participant Application Form



Name: (First, MI, Last) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Age: \_\_\_\_\_ Birth date: \_\_\_\_\_ Country of Birth: \_\_\_\_\_ Allergies: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

### WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in activities offered by Sinkunia Community, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in this program is minimal, but possible, I knowingly and freely assume this risk, both known and unknown, even if arising from the negligence of my child or others, assume full responsibility for my participation; I will comply with all rules and regulation of Sinkunia Community.
2. If I am injured while participating in this activity, I will remove myself from participation and bring such to the attention of the nearest staff immediately;
3. I, for myself and on behalf of my child, hereby release and hold harmless Sinkunia Community and its employees, and other participants, with respect to all injury, disability, death, or damage to person or property, whether arising from the negligence of the releases or otherwise.
4. By signing below Sinkunia Community would also have authorization to use the youth's basic identification information and photo in any of its organization's related promotion materials.
5. As the parent or legal guardian of the above-named participant, I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor. This care may be given under whatever conditions are necessary to preserve the life, limb, or well-being of my dependent.
6. I have read this Release of Liability and Assumption of Risk Agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntary without any incentive.

Participant Signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

### For Parents/Guardians

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releases, and, for myself, I release and agree to insure the Releasees from all liable incident to my minor child's involvement or participation in these activities as provided above, even if arising from the negligence of the service provider.

Parent/Guardian's Signature: \_\_\_\_\_ Date signed: \_\_\_\_\_