By signing this document you will waive certain legal rights, including the right to sue. PLEASE READ CAREFULLY

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| **Guider instructions:** This form must be used for all **Conditional Activities and Adventure Activities**. (See Key Terms in Safe Guide). This form is signed by custodial parent(s) or guardian(s) of a minor child or by all participants who are provincial age of majority.**Parent/guardian instructions**: Review the information below and the information about the activity on the Parent/Guardian Permission. Initial all the activities in 2(a) that you are consenting to your child/ward participating in, then sign the form at the bottom. Your child/ward will not be permitted to participate in those activities for which you have not initialed. |

I (we), hereby acknowledge and agree that

in consideration of being permitted to participate in the activities

(name of participant)

of Girl Guides of Canada–Guides du Canada (herein called the Association).

|  |  |  |  |
| --- | --- | --- | --- |
| At | TRCA Albion Hills Field Centre | on | May 30-June 1, 2025 |
|  | Location |  | Date(s) |

1. I (we) do hereby release the Association, its members, officers, directors, employees, volunteers and independent contractors from all liability, claims, causes of action of any kind whatsoever in respect of all personal injuries, loss of life or property losses which our daughter/ward (I) may suffer arising out of the activities of the Association.
2. And I (we) do hereby acknowledge and agree:
3. That the adventurous activities (listed below) may be dangerous and expose our daughter/ward (me) to risks and hazards.

|  |  |  |
| --- | --- | --- |
| Activities |  | *(Initial activities to show consent for participation.)* |
| Bike the Hills (mountain biking) |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |

1. That I (we) freely and voluntarily assume all the aforesaid risks and hazards as noted on the attached Parent/Guardian Permission for my (our) daughter/ward or myself.
2. That I (we) have carefully read this Release, Waiver and Assumption of Risk and Indemnity agreement, that I (we) fully understand same, and that I am (we are) freely and voluntarily executing same.
3. That I (we) understand clearly that by signing this Release I (we) will be forever prevented from suing or otherwise claiming against the Association, its Members, officers, directors, employees, volunteers or independent contractors with respect to any matter arising from these activities.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| DATED at  |   | , this  |   | day of  |   | in the year |  .  |
|  | location |  | day |  | month |  | year |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| \* Signature(s) of custodial parent/guardian, or participant if age of majority:  |  | Relationship to participant (if applicable): |  | Signature of witness (must be of provincial age of majority): |
|  |  |  |  |  |

\* *When only one parent signs to indicate consent, he/she/they does so in good faith and is presumed to be acting with the consent of the other legal parent/guardian.*