



Informed Consent/Permission Form for Volunteer Activities

THIS FORM MUST BE READ AND SIGNED BY EVERY INDIVIDUAL WHO WISHES TO PARTICIPATE AND/OR BY A PARENT OR GUARDIAN OF A PARTICIPATING VOLUNTEER UNDER 18 YEARS OF AGE

Norwood Park Elementary School is arranging Field trips, walking excursions, athletics, School based events

ELEMENTS OF RISK:

(description of activity) involves certain elements of risk. Injuries may occur while participating in these activities. The following list includes, but is not limited to, examples of the types of injury which may result from participating in this activity:

- 1. Slips 2. falls 3. trips 4.

The risk of sustaining these types of injuries may result from the nature of the activity and can occur without any fault of either the volunteer or the school board, its employees/agents or the facility where the activity is taking place.

If this activity requires you to use your vehicle, or if you voluntarily use your vehicle in the course of the above activity, you represent to the Hamilton-Wentworth District School Board that you have lawful use of the vehicle, you are lawfully licensed to use the vehicle and you have all required insurance in place.

If this activity requires you to come into contact with any student of the Hamilton-Wentworth District School Board or you are required to access any operational school site, you have attached to this document a current Vulnerable Sector Screening certificate as required by Hamilton-Wentworth District School Board policies.

The Hamilton-Wentworth District School Board does NOT provide WSIB, accidental death, disability, dismemberment or medical expense insurance on behalf of individuals participating in this activity. Student Accident Insurance coverage is available and may be purchased through the current carrier, Reliable Life at 1-800-463-KIDS (5437) or ON-LINE at www.insuremykids.com

ACKNOWLEDGEMENT:

WE HAVE READ THE ABOVE. I/WE UNDERSTAND THAT IN PARTICIPATING IN THE ACTIVITY DESCRIBED ABOVE, I/WE ARE ASSUMING ALL RISKS ASSOCIATED WITH DOING SO.

Signature of Student (if over 18): _____ Date: _____

Signature of Parent/Guardian/Volunteer: _____ Date: _____

PERMISSION:

I, _____ give _____ permission to

participate in the _____ to be held on _____

Signature of Parent/Guardian: _____ Date: _____