



# Power4Teens Inc. – Girls Group Registration Form

To be filled out by PARENT or GUARDIAN

Please be thorough and conscientious in completing this form. The more we know about your child, the better camp experience we can provide.

## Participant Information:

Daughter's Full Name: \_\_\_\_\_ TWEEN OR TEEN Program?

Age: \_\_\_\_\_ DOB (mm/dd/yyyy): \_\_\_\_\_

Child's Health Card Number: \_\_\_\_\_ Version Code: \_\_\_\_\_

Allergies (if applicable): \_\_\_\_\_

Any medical issues or other info we should be aware of? \_\_\_\_\_

\_\_\_\_\_

## Emergency Contact Information:

### Parent #1 Information:

Name: \_\_\_\_\_

Phone (Primary): \_\_\_\_\_

Email: \_\_\_\_\_

### Parent #2 Information:

Name: \_\_\_\_\_

Phone (Primary): \_\_\_\_\_

Email: \_\_\_\_\_

What do you want your daughter to get out of this experience?

\_\_\_\_\_

\_\_\_\_\_

Brief personality traits (traits that need enhancing & traits that she has that we should make sure we benefit from)?

\_\_\_\_\_

\_\_\_\_\_

**\*\* We are so pleased your daughter is joining us for this incredible experience. Please contact Shyanne at 416 834-0331 for more information. When we receive your registration form & payment, your registration is complete.**



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### **ACKNOWLEDGEMENT OF RISK, WAIVER AND RELEASE OF LIABILITY**

**WARNING: THIS DOCUMENT WILL AFFECT YOUR LEGAL RIGHTS, READ IT CAREFULLY!**

A parent or guardian must sign. Every participant/parent/guardian must read and understand this Acknowledgement, Waiver and Release of Liability prior to participating in **POWER4TEENS INC.(P4T)** Girls Group, summer camp, overnight camp. Every participant is advised to consult with their physician before engaging in the athletic activities.

The undersigned (the “Participant”) hereby enters into this Agreement with and for the benefit of **P4T** its directors, employees, volunteers, trainers, business operators and site property owners or Occupiers (the “Company”). “Occupiers” is defined in accordance with the definition of Occupiers contained in the Occupiers Liability legislation in the Province of Ontario.

The parent/guardian acknowledges and understands that there are inherent and significant risks associated with participation in athletic activities, including (but not limited to) the potential for serious personal injury caused by any event or any condition of the facilities or equipment provided by the Company, and health risks such as light-headedness, fainting, increased or decreased blood pressure, chest discomfort, muscle cramps, broken bones, strains, sprains, bruises, concussion, hyperthermia, abnormal heart rate, soreness, nausea, heart attack, stroke and possibly death.

The parent/guardian hereby accepts and assumes all responsibility for all risks and possibilities of personal injury, death, property damage or loss resulting from his/her child/wardens’ participation in the athletic activities and events at **POWER4TEENS INC.**, including accidents or injuries that occur within and outside the facilities (e.g. on church property, walking to lakeshore, Cottage property, walking into Bala for ski show, wakeboarding, swimming, paddle boarding with **P4T** and/or Oceah Oceah, hiking and other general **P4T** activities). The Participant has read “camp or girls group outline”, is aware of all the activities on the camp and freely accepts the associated risks and agrees to the terms of this Waiver and Release, even if the Company is found to be negligent or in breach of any duty of care or any obligation to the Participant with respect to his/her participation in **POWER4TEENS INC.** activities.

The undersigned Participant, for him/herself and his/her heirs, next of kin, executors, administrators and assigns (collectively, the “Releasing Parties”), does hereby agree: a. to waive all claims that the Releasing Parties or any of them may have in the future against **POWER4TEENS INC.**, its directors, officers, employees, agents, insurers and representatives (collectively, the “Released Parties”); b. to release and forever discharge the Released Parties from all liability for personal injury, death, property damage or loss resulting from the Participant’s participation in all activities due to any cause, and c. to be liable for and to hold harmless and indemnify the Released Parties from all actions, proceedings, claims, damages, costs, demands, including hospital costs, court costs and costs on a solicitor and his own client basis, and liabilities of whatsoever nature or kind arising out of or in any way connected with the Participant’s participation in athletic and all other activities.

This agreement shall be governed by and construed in accordance with the laws of the Province of Ontario, and any legal actions, claims or demands shall be handled in a court of competent jurisdiction within such Province.

The Participant understands that this document is binding on him/herself and his/her heirs, next of kin, executors, administrators and assigns. I hereby certify that the participant is suffering under no legal



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disabilities, and that I (or my parent or guardian) have read this document carefully, understand each term and provision in its entirety, have agreed to the terms freely and voluntarily. Having read the foregoing, I (or my parent or guardian) knowingly acknowledge my understanding of the risks set forth herein and knowingly agree to accept full responsibility for my own exposure to such risks.

I give **POWER4TEENS INC.**, permission to take and use photographs and/or videos of my child which may be used in any and all of its publications, including our website, brochures or promotional materials. Additionally, we waive any right to royalties or other compensation arising related to the use of the photograph and/or video.

## COVID-19 Liability Release Waiver

Due to the 2019-2020 outbreak of the novel Coronavirus (COVID-19), our business is taking extra precautions with the care of every client to include health history review and enhanced sanitation/disinfecting procedures in compliance with Health Canada & CDC guidance.

Symptoms of COVID-19 include:

- Fever
- Fatigue
- Dry Cough
- Difficulty Breathing

I agree to the following:

- I understand the above symptoms and affirm that I, as well as all household members, do not currently have, nor have experienced the symptoms listed above within the last 14 days.
- I affirm that I, as well as all household members, have not been diagnosed with COVID-19 within the past 30 days.
- I affirm that I, as well as all household members, have not knowingly been exposed to anyone diagnosed with COVID-19 within the past 30 days.
- I affirm that I, as well as all household members, have not traveled outside of the country or to any city considered to be a “hot spot” for COVID-19 infections within the past 30-days.
- I understand that **POWER4TEENS INC.** cannot be held liable for any exposure to the COVID-19 virus caused by misinformation on this form or the health history provided by each client.

Our business is following all necessary procedures to prevent the spread of COVID-19. By signing below, I agree to each statement above and release **POWER4TEENS INC.** from any and all liability for unintentional exposure or harm due to COVID-19.

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Name (please print)

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Signature of Parent or Guardian

*\*Digital Signature accepted\**

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Date