



## YOUTH ACTION COMMITTEE 2021/2022 Parental Consent Form

<b>Date:</b>	
<b>Child's first and last name:</b>	

### PHOTO RELEASE

Permission is hereby granted for the City of Campbell River to take any use photographs and videos of the above-mentioned participation for promotions and records.

YES       NO

### PARENTAL CONSENT

I consent to my child's participation in the program. I am aware that there are risks associated with participation in the program, including the risk of injury, and I consent to my child's participation in spite of all risks.

I acknowledge that it is my responsibility to advise the City of Campbell River of any medial or other conditions that may affect my child's participation in the program.

In the event that my child requires medical attention, I consent to my child being transported to the nearest emergency centre, including by ambulance if necessary, and accept that I am responsible for any costs of such ambulance service.

I have read this Parental Consent Form and understand and accept its terms.

<b>Parent/Guardian Name:</b>	
<b>Parent/Guardian Signature:</b>	