



# ROAR Kids Camp 2019 Waiver & Off-Site Activity Authorization Form



Week 1 (July 15-19)    Week 2 (July 22-26)    9:00 AM - 4:00 PM    Entering SK-Grade 6

I \_\_\_\_\_, being the parent/legal guardian and having legal custody of \_\_\_\_\_, a minor, do hereby consent to said child participating in activities and related off site trips of Community Bible Church.

I do hereby acknowledge that I understand that this release is being relied upon by Community Bible Church and teachers or sponsors accompanying the children on said trips and activities; and without this instrument being executed by me, said minor would not be permitted to attend field trips nor engage in activities related hereto.

**During this particular Day Camp event, your child will be leaving the church facility to the following place:**

**1. Goulbourn Recreation Complex**, 1500 Shea Road, Stittsville, ON, K2S 0B2

Transportation: Bus, WUBS Transit

When: July 16th or July 23th from 12:30pm-3:30pm.

**2. Village Square Park**, 6000 Abbott St E, Stittsville, ON K2S 1E2

Transportation: Walking with teachers

When: July 16th or July 23th from 1:00pm-3:00pm.

**3. Xtreme Trampoline Park**, 50 Frank Nighbor Place, Kanata, ON K2V 1B9

Transportation: Bus, WUBS Transit

When: July 18th or July 25th from 12:30pm-3:30pm.

I do hereby release, discharge and exonerate Community Bible Church and all persons acting as teachers or sponsors on said activities and trips from any liability whatsoever resulting from personal injury to said minor or damage to property of said minor which may occur at said activities or trips or connection therewith.

I do hereby certify that I assume full responsibility and liability for any acts committed by said minor during activities, and trips related thereto resulting in injury or damage to the property of another.

Should it be necessary for my child to return home for medical reasons, disciplinary actions or otherwise, I will assume all transportation costs. I affirm that I have read and accept the above items in this waiver and activity authorization form.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Name (printed): \_\_\_\_\_ Phone: \_\_\_\_\_