

# Swim Camp Registration

Summer 2017

**IMPORTANT NOTICE:** Please bring a completed registration form and waiver with you during time of registration. Payment is required in full prior to the first day of camp. You will receive confirmation of your enrolment prior to the start of the swimming session. If you have any questions, please contact Guest Services at 975-8544. Swim Camp schedules will be released by August 15, 2017.

\*Participants must be able to swim comfortably in shallow water. Swim tests may be required.

<b>Participant Information</b>					
Name: _____	DOB (mm/dd/yyyy): _____	Age: _____			
Gender: _____	House #: _____	Phone #: _____	Health Care #: _____		
Camp Dates (Please choose): Aug 21-25, 2017 _____		Aug 28-Sept 1, 2017 _____			
<b>Medical History</b>					
Allergies: _____	If YES please describe:				
	<div style="border: 1px solid black; height: 60px;"></div>				
Medication: _____	If YES please describe:				
	<div style="border: 1px solid black; height: 60px;"></div>				
Additional Information (E.g. injuries or pre-existing conditions):					
<div style="border: 1px solid black; height: 60px;"></div>					
<b>Contact Information</b>					
Contact Person: _____	Phone #(W) _____	Phone #(H) _____			
Relationship: _____	Email: _____				
Alternative Contact: _____	Phone #(W) _____	Phone #(H) _____			
Relationship: _____					
<b>*LUNCH Supervision (additional \$10/day charge):</b>	M	Tu	W	Th	F
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Photo RELEASE**

I hereby grant the City of Iqaluit approval to publish photographs in the likeness of a child (the "Child") named below for which I am parent or guardian. Photographs may be used for City of Iqaluit publications including but not limited to brochures, advertising and for use on the City of Iqaluit Web Site.

In the event that the City of Iqaluit uses a photograph depicting the Child, in consideration of the publishing of such photograph, and for other good and valuable consideration herein acknowledged as received, the undersigned hereby grants to the City of Iqaluit, its heirs, legal representatives and assigns, those for whom the City of Iqaluit is acting, and those acting with its authority and legal permission, the irrevocable and unrestricted right and permission to copyright in their own name or otherwise, and in part, or composite or distorted in character or in form, without restriction as to changes and alterations, in conjunction with the Child's name or a fictitious name, or reproductions thereof in color or otherwise, made through any medium and in any and all media now or hereafter known for illustration, promotion, art, editorial, advertising, trade, or any other purpose whatsoever. I also consent to the use of any printed matter in conjunction herewith.

I hereby waive any right that I may have on behalf of the Child to inspect or approve the finished product or products and the advertising copy or other matter that may be used in conjunction therewith or the use to which it may be applied.

I hereby release, discharge and agree to save harmless the City of Iqaluit, its heirs, legal representatives and assigns, and all persons acting under the City of Iqaluit's permission or authority or those for whom it is acting, from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise that may occur or be produced in the taking of said picture or in any subsequent processing thereof, as well as any publication thereof, including without limitation any claims for libel or invasion of privacy.

I hereby warrant that I am the parent or guardian of the child named below, am of full age and have the right to contract in my own name. I have read the above agreement and release the City of Iqaluit to publish the photograph(s) for its purposes. Photo taken during Swimming Lessons Programming, 2017

_____	_____
Name of Parent/Guardian	Name of the Child
_____	_____
Signature of Parent/Guardian	Date
_____	_____
Witness	Date



**IAC Swimming Lessons Program**

**IF YOU HAVE ANY QUESTIONS OR CONCERNS ABOUT THIS WAIVER PLEASE CONTACT THE CITY OF IQUALUIT PRIOR TO SIGNING AT 975-8544. Completed waiver must be submitted prior to the first swim lesson date.**

Participant's Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Contact Number ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

The IAC Swimming Lessons Program strives to provide a safe, clean and fun atmosphere.

In Consideration of my child's voluntary participation in the Program in Iqaluit, Nunavut, including all Program Activities planned throughout the City of Iqaluit, I acknowledge and agree on behalf of myself and my child identified above that:

1. The risk of serious injury from participating in the Program Activities, although minimal, does exist;
2. My child is physically fit to participate in Swimming Lessons and I agree that all Program Activities are appropriate for my child;
3. I, for myself and my child, knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the City of Iqaluit and assume full responsibility for my child's participation at the Program;
4. I and my child willingly agree to comply with the stated Terms and Conditions for participation and to obey the direction and requests of the City of Iqaluit staff. If I observe any hazards during my presence or my child's participation, I will remove myself and my child from the participation and immediately bring the said hazard to the attention of the nearest City of Iqaluit **Recreation Department** Employee;
5. I, for myself, my child and on behalf of my heirs, assigns, personal representatives, insurers and next of kin, HEREBY WAIVE, RELEASE, AND HOLD HARMLESS, the City of Iqaluit and its agents, employees, volunteers, officers and directors (collectively the "City of Iqaluit") from any and all claims, demands, lawsuits, actions, causes of action, complaints, litigation, costs (including legal costs or fees) or liabilities arising out of, or in any way related to, any loss, damage, expense or injury (whether to person or property) that I or my child may suffer as a result of my child's participation in the lessons, due to any cause whatsoever;
6. I AGREE TO HOLD HARMLESS AND INDEMNIFY the City of Iqaluit and its partners from any and all claims, demands, lawsuits, actions, causes of action, complaints, litigation, expenses, costs (including legal costs or fees) or damages (whether to person or property), of any kind or nature whatsoever, that they might suffer or incur arising out of or in any way related to my minor child's involvement or participation in the lessons; and
7. This release and waiver extends to all acts of negligence by the City of Iqaluit and is intended to be as broad and inclusive as permitted by the laws of the Nunavut Territory, and of Canada as

applied in Nunavut, and if any portion of the agreement is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP RIGHTS TO MYSELF AND MY CHILD BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT INDUCEMENT.

X \_\_\_\_\_

Parent/Guardian

Date \_\_\_\_\_

X \_\_\_\_\_

Witness

\_\_\_\_\_

Witness Name – Printed

# Assumption of Risk

**While unlikely, there are some consequences of participating in the following planned activities that could cause serious injury:**

Activities that may occur during Swimming Lessons include:

- Swimming drills;
- Competitive activities;
- Use of pool features (e.g. waterslide etc);
- Supervised camp recreational activities (Skateboarding/Rollerblading; turf activities) ;
- Transportation to and from Camp activities (walking, taxis, bus);
- Special events (e.g. BBQ)

I HAVE READ THIS ASSUMPTION OF RISK, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP RIGHTS TO MYSELF AND MY CHILD BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT INDUCEMENT.

X \_\_\_\_\_

Parent/Guardian

Date \_\_\_\_\_

X \_\_\_\_\_

Witness

\_\_\_\_\_

Witness Name – Printed