



For any questions or concerns please contact
Afia Ansu
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FFAF Summer Camp 2023 CONSENT FORM

I, _____ (name of parent), would like to register my child for the FFAF Summer Program, scheduled to take place from Monday, July 03, 2023, to Friday, August 18, 2023, from 8:00 a.m. – 3 p.m. Monday to Friday.

Participants must be between the ages of 6-16.

Participant Name: _____ Date of Birth (dd/mm/yyyy): _____

Address: _____

Emergency contact: _____

Does child have any allergies? Yes ___ No ___ Specify: _____

Parent/Guardian Name: _____ Parent/Guardian Phone _____

Email: _____

Liability

In consideration of the acceptance of my application for the above program, I hereby waive, release, and discharge all claims for damages for personal injury, property damages or which may hereafter occur as a result of participation in said program.

This release is intended to discharge in advance FFAF its officials, partners, employees, volunteers and agents from liability, even though that liability may arise out of perceived negligence on the part of persons mentioned above.

Consent for Treatment

I hereby give my consent to have the above applicant treated by emergency medical personnel, a physician, or surgeon, in case of sudden illness or injury while participating in the above activity

I have read and understood the foregoing registration liability release and parental consent form and agree to all of its terms and conditions.

Signature: _____ Will your child be walking home after the program? yes ___ no ___

For more information or if you have any questions/concerns, please contact Venecia Anderson at 905-499-4486

PHOTO/VIDEO RELEASE FORM

I, _____ (name of parent), authorize FFAF to use my child's name and/or image in video or photos for the purpose of public education or marketing materials related to their not-for-profit community safety efforts. I reserve the right to revoke this permission at any time in the future by informing the Association in writing.

Name of child: _____ Name of Parent/Guardian: _____

Parent/Guardian Signature: _____ Date: _____