

EXPLORE YU – SUMMER 2024 CONSENT TO PARTICIPATE, DISCLAIMERS, ASSUMPTION OF RISKS, RELEASE OF LIABILITY, WAIVER OF CLAIMS, AND INDEMNITY AGREEMENT

On behalf of the Faculty of Liberal Arts & Professional Studies (LA&PS) at York University, we welcome you to Explore YU, a youth program for grade 10 and 11 domestic and international students! This year, we have designed a program where campers can learn while having fun. Please take a moment to fill out the camp activity waiver form. This information is necessary should we need to contact you. This form **must** be signed in order for the camper to participate in Explore YU – Summer 2024. The information on this agreement is considered confidential and will only be available to organizers of the Explore YU – Summer 2024.

NAME OF CAMPER (Please Print): _____

ADDRESS (Street Name & #): _____ CITY: _____ PROVINCE: _____

TELEPHONE NUMBER(S): _____ EMAIL: _____

DATES OF THE EXPLORE YU - SUMMER 2024 PROGRAM: JULY 8, 9, 11, AND 12, 2024 FROM 8:30 A.M. TO 3:00 P.M ON KEELE CAMPUS and JULY 10, 2024, FROM 8:30 A.M. TO 5:00 P.M. DOWNTOWN TORONTO.

LOCATION OF EXPLORE YU – SUMMER 2024 PROGRAM: YORK UNIVERSITY– KEELE CAMPUS (JULY 8, 9, 11, AND 12) AND DOWNTOWN TORONTO (JULY 10).

PARENT/GUARDIAN INFORMATION AND CONSENT:

NAME OF PARENT/GUARDIAN #1 (Please Print): _____

ADDRESS (Street Name & #): _____ CITY: _____ PROVINCE: _____

TELEPHONE NUMBER(S): _____ EMAIL: _____

(If applicable) NAME OF PARENT/GUARDIAN #2 (Please Print):

(If different than above)

ADDRESS (Street Name & #): _____ CITY: _____ PROVINCE: _____

TELEPHONE NUMBER(S): _____ EMAIL: _____

I give permission for my camper to take part in Explore YU from July 8 – 12, 2024, from 8:30 a.m. to 3:00 p.m/5:00 p.m. (field trip day).

Parent/Guardian’s Signature: _____ **Date:** _____

DISCLAIMER

The Board of Governors of York University, their officers, directors, agents, contractors, employees, volunteers, members and representatives (all hereunder collectively referred to as “the Released Parties”) are not responsible for any injury, loss, death or damage of any kind sustained by any person while participating in the activities/events as stated above (“the Program”) and related activities of the Program provided through the

Released Parties, including injury, loss, death or damage which might be caused by the Negligence of the Released Parties. I am aware that my camper taking part in the Program has some inherent risks.

ASSUMPTION OF RISKS

I freely accept and fully assume all risks, dangers and hazards and the possibility of personal injury, death, property damage, expense and other loss delay or inconvenience resulting there from or from acts or omissions, including negligence of the Releases.

Initials: _____

I freely accept and fully assume all risks, dangers and hazards and the possibility of property damage, expense, and other loss, delay or inconvenience resulting from acts or omissions of my camper

Initials: _____

I understand that I am solely responsible for my camper's own health, medical, dental, and property insurance.

Initials: _____

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

In consideration of the Released Parties allowing me to voluntarily take part in the Program, I hereby agree as follows:

1. RELEASE AND WAIVE as against the Released Parties all losses, liabilities, damages, injuries including deaths, claims, demands, lawsuits, costs, expenses including legal fees and disbursements, and any other liability of any kind including negligence, howsoever arising out of or in connection with my camper's participation in the Program. _____ (initial here that you read the paragraph).
2. I shall indemnify and hold harmless the Released Parties from any and all losses, liabilities, damages, injuries, claims, demands, lawsuits, costs, expenses including legal fees and disbursements, and any other liability of any kind including negligence, breach of contract or breach of any statutory or other duty of care, including any duty of care owed under the **Occupiers Liability Act, RSO 1990 c.o. 2.**, as amended, on the part of the released parties, howsoever arising out of or in connection with my voluntary participation in the Program.
3. This agreement is governed by the laws of the Province of Ontario and federal laws of Canada applicable there. This Agreement survives termination of my camper's participation in the Program.
4. This Agreement ensures to the benefit of and is binding upon me, my camper, administrators, representatives, successors and assigns.

ACKNOWLEDGEMENT

In entering into this Agreement, I am not relying upon any oral or written representations or statements made by the Released Parties other than what is in this Agreement.

I HAVE READ AND UNDERSTOOD THIS AGREEMENT AND I AM AWARE THAT BY VOLUNTARILY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY CAMPER, EXECUTORS, ADMINISTRATORS, AND ASSIGNS MAY HAVE AGAINST THE RELEASES.

Signed this _____ day of _____, 20____.

SIGNATURE OF PARENT/GUARDIAN

PRINTED NAME OF PARENT/GUARDIAN

EMERGENCY CONTACT INFORMATION:

PERSON TO CONTACT IN CASE OF EMERGENCY

RELATIONSHIP TO CAMPER

EMERGENCY PHONE NUMBER(S)

EMERGENCY EMAIL (optional)

PICK UP AUTHORIZATION: At the conclusion of the Program, the following person(s) will be authorized to pick up my child:

SIGN-IN/SIGN-OUT RELEASE: At the conclusion of each day of the Program, I authorize my camper to sign-out on my behalf and leave without having to wait for a parent/guardian to pick them up. Initials: _____

PHOTO and VIDEO RELEASE: I authorize York University to use any photograph(s) and/or videos that are taken of my camper while they are participating in events for promotional materials and media articles. Initials: _____

Privacy: Personal information in connection with this form is collected under the authority of *The York University Act, 1965* and will be used for the purpose of administering your camper's participation in the activity/event and related purposes. If you have any **questions about the collection, use and disclosure** of your personal information by York University, please contact York University's Office of Information, Privacy, and Copyright (<https://ipo.info.yorku.ca>) 4700 Keele Street, Toronto, Ontario, M3J 1P3.