

## **CONSENT, ASSUMPTION OF RISKS AND RELEASE**

Children who will attend the West Coast Amateur Musicians Society ("WCAMS") Summer Music Camp in Squamish, British Columbia, from July 22 to 29, 2018 (the "Camp"):

<b><u>Name</u></b>	<b><u>Date of Birth</u></b>	<b><u>Grade Entering in Sept. 2018</u></b>
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(the "Children")

Name(s) of adult(s) who will attend the Camp with the Children:

<b><u>Name</u></b>	<b><u>Relationship to Children</u></b>
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THE UNDERSIGNED PARENT OR GUARDIAN HEREBY ACKNOWLEDGES THAT:

I am aware that participating in music, art and drama classes as well as participating in outdoor games and other camp activities (collectively, the "Activities") may involve many risks, dangers and hazards, including but not limited to negligence of other campers, parents and other persons, and NEGLIGENCE ON THE PART OF THE CAMP OR ITS STAFF, INCLUDING ALL FAILURE ON THE PART OF THE CAMP OR ITS STAFF TO SAFEGUARD OR PROTECT ME AND THE CHILDREN FROM THE RISKS, DANGERS AND HAZARDS OF THE ACTIVITIES; and

I am aware of the risks, dangers and hazards associated with attending the Camp and participating in Camp activities, and I freely accept and fully assume all such risks, dangers and hazards and the possibility of personal injury, death, property damage and loss resulting therefrom.

With the foregoing awareness, I hereby consent to the attendance of the Children at the Camp and to the participation by the Children in all activities and programs of the Camp.

In consideration of WCAMS allowing the Children and me (or the above-named adult(s)) to attend the Camp, I, on behalf of myself and on behalf of the Children:

1. WAIVE ANY AND ALL CLAIMS that I and the Children have or may in the future have against WCAMS and its directors, officers, employees, volunteers, agents, representatives, sponsors, successors and assigns (all of whom are hereinafter collectively referred to as the "RELEASEES") and RELEASE THE RELEASEES from any and all liability for any loss, damage, expense or injury, including death, that I and the Children may suffer, or that my next-of-kin may suffer resulting from either my use or the Children's use of and attendance at the Camp DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE, BREACH OF CONTRACT OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, INCLUDING ANY DUTY OF CARE UNDER THE OCCUPIERS LIABILITY ACT, R.S.B.C. 1996, c. 337, ON THE PART OF THE RELEASEES, AND ALSO INCLUDING THE FAILURE ON THE PART OF THE

RELEASEES TO SAFEGUARD OR PROTECT ME AND THE CHILDREN FROM THE RISKS, DANGERS AND HAZARDS OF THE ACTIVITIES REFERRED TO ABOVE;

2. AGREE TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES for any and all liability for any damage to property of or personal injury to any third party, resulting from my use or the Children’s use of or presence at the Camp;
3. AGREE TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES for any and all costs, claims, expenses, charges, etc., including the costs of defending any lawsuit brought by me, the Children’s legal representative, or otherwise;
4. CONSENT to the Children receiving any and all medical treatment which WCAMS or any director, officer, employee, volunteer, agent or representative of WCAMS reasonably considers to be advisable in the event of illness or injury suffered by the Children during the Camp;
5. AGREE that this Consent, Assumption of Risks and Release shall be effective and binding upon my heirs, next-of-kin, executors, administrators, assigns and representatives, in the event of my death or incapacity and in the event of the Children’s death or incapacity;
6. AGREE that any litigation involving the Camp shall be brought solely within the Province of British Columbia and shall be within the exclusive jurisdiction of the Courts of the Province of British Columbia.

In this Consent, Assumption of Risks and Release, a word importing the singular number has the same meaning when used in the plural number, and vice versa.

I HEREBY REPRESENT, WARRANT AND COVENANT with WCAMS that all of the information provided in this Consent, Assumption of Risks and Release is true and complete in all respects. I hereby acknowledge that WCAMS is relying on the foregoing representation, warranty and covenant in granting permission to me and the Children to attend the Camp.

DATE SIGNED: \_\_\_\_\_, 2018.

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Signature of Parent or Legal Guardian

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Signature of Witness

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Printed Name of Parent or Legal Guardian

\_\_\_\_\_  
Printed Name of Witness

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Printed Name of Parent or Legal Guardian

\_\_\_\_\_  
Printed Name of Witness

Please complete this form before camp and mail to:  
Sara Brusse, WCAMS President  
1787 Drummond Drive,  
Vancouver, BC, V6T 1B7