



Boys & Girls Clubs  
of Saskatoon

## CORE NEIGHBOURHOOD CLUB PROGRAM 2018-2019

Youth Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Parent/Guardian (if applicable): \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Birthdate: mm      dd      yr      Age: \_\_\_\_\_      Gender: \_\_\_\_\_

Youth lives with:     Mother & Father     Mother     Father     Guardian     Other: \_\_\_\_\_

Number of Years Registered in Boys & Girls Clubs of Saskatoon: \_\_\_\_\_

### EMERGENCY CONTACTS:

First & Last Name	Relationship to Youth	Home Phone #	Cell/Other #

First & Last Name	Relationship to Youth	Home Phone #	Cell/Other #

### Medical Information:

Youth's Name: \_\_\_\_\_

Health Card #: \_\_\_\_\_ Family Doctor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Allergies:  Seasonal \_\_\_\_\_  Food \_\_\_\_\_  Insects \_\_\_\_\_  Other \_\_\_\_\_

Do/Does you/your youth carry:  Epi-pen     Inhaler     Other \_\_\_\_\_

The following information is collected and used solely, on an anonymous basis, for granting and organizational purposes only:

Youth's Name: \_\_\_\_\_

Ethnicity:            First Nations                            Metis                            Other: \_\_\_\_\_

New to Canada (have lived in Canada for 5 years or less - date arrived): mm            dd            yyyy \_\_\_\_\_

Language(s) Spoken: \_\_\_\_\_

Military Family:    yes                            no

Family Setting:    Mother & Father                            Mother                            Father  
 Guardian \_\_\_\_\_                            Other \_\_\_\_\_  
*Relationship to Youth*

Gender: \_\_\_\_\_

Family Income:    Up to \$30,000                            \$30,000 to \$50,000  
 \$50,000 to \$75,000                            \$75,000 & over

<p><u>Office use only:</u></p> <p>Administration: <input type="checkbox"/></p> <p>SV: <input type="checkbox"/></p> <p>MC: <input type="checkbox"/></p> <p>Subsidy: <input type="checkbox"/></p> <p>ME: <input type="checkbox"/></p>
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## Boys & Girls Clubs of Saskatoon Participants Waiver of Liability & Media Consent

Boys & Girls Clubs of Saskatoon takes the safety of all youth registered in our programs very seriously and will take every precaution it possibly can in order to ensure the safety of you/your youth. The risk of sustaining injuries that result from the nature of the activities can occur without fault of the participant, Boys & Girls Clubs of Saskatoon, its employees/volunteers or the facility where the activity is taking place. By choosing to take part and to register yourself/your youth at Core Neighbourhood Youth Club, you are accepting risk that you/your youth may be injured. The chance of an injury occurring can be reduced by carefully following instructions at all times while engaged in program activities and by providing yourself/your youth with any necessary safety equipment such as proper shoes, clothing etc.

I, \_\_\_\_\_ **(Youth/Parent/Guardian)** of \_\_\_\_\_ **(Youth Name)** consent to have myself/my youth receive services from Boys & Girls Clubs of Saskatoon and am registering myself/my youth voluntarily. The consent will remain in effect for the duration of the program. I understand and agree to receive the program services delivered as part of the Boys & Girls Clubs of Saskatoon program that I have registered myself/my youth in. Programming activities such as recreation activities and outings (field trips) involve certain elements of risk. Injuries may occur while participating in these activities.

### ACKNOWLEDGEMENT

The above named youth has permission to participate in program activities as planned by the Core Neighbourhood Youth Club that I have registered myself/my youth in. I waive my legal rights against Boys & Girls Clubs of Saskatoon for any loss, injury or damage suffered during or by reason of participating in **all events, programs and activities scheduled while I/my youth am/is in the program**. I authorize the application of emergency medical attention and undertake to be responsible for any hospitalization, medical expense and ambulance expense that may be incurred.

\_\_\_\_\_  
Youth/Parent/Guardian Signature

\_\_\_\_\_  
Date

### MEDIA RELEASE

I, \_\_\_\_\_ **(Youth/Parent/Guardian)** give permission for myself/my youth \_\_\_\_\_ to appear in photographs, video and/or audio that may be used in the promotional materials of Boys & Girls Clubs of Saskatoon. My/my youth's image may be published or used in newspapers, promotional videos, television commercials, television news items, program brochures, poster, social media sites etc. or otherwise displayed to the public or used for other educational/fundraising purposes, either in whole or in part by Boys & Girls Clubs of Saskatoon, Boys & Girls Clubs of Canada and/or external partners. **No names will ever be used in association with my/my youth's image without written permission by me/parent/guardian.**

By my signature as youth/parent/guardian for \_\_\_\_\_ **(youth name)** I give permission to Boys & Girls Clubs of Saskatoon to use any image taken during a Boys & Girls Clubs of Saskatoon program for any of the purposes as described above.

\_\_\_\_\_  
Youth Name/Parent/Guardian Name (printed) and Signature

\_\_\_\_\_  
Date

The Boys & Girls Clubs of Saskatoon Participants Waiver of Liability and Media Consent applies to Boys & Girls Clubs of Saskatoon Programs for the 2018/2019 school year.