

## 2010 Celtic Discovery Day Camp Waiver Form

Read this document thoroughly before you sign.

It must be signed and dated in order for your child to participate in Celtic Discovery Day Camp.

### Medical Statement

In case of emergency or illness, every effort will be made to contact the parents or guardians. In the event that contact cannot be made, I agree that in case of emergency or illness, a qualified medical physician may attend to my child.

### Informed Consent

I am aware that Celtic Discovery Day Camp may be involved in some of the following activities: swimming, running, off area trips such as walking to local parks and going to other facilities in Fredericton.

### Field Trip Permission

I hereby give written consent for my child to participate in the trips away from the Charlotte Street Arts Centre as an activity for Day Camps. I fully understand that reasonable precautions and safety measures will be taken by the Camp Program staff and I waive any liability on the part of Celtic Discovery Day Camp.

### Indemnification and Release

I, the undersigned participant, on behalf of myself, my heirs, legatees and assigns, agree to indemnify, save and hold harmless Celtic Discovery Day Camp or any of its agents, representatives, employees or assigns for my child's health, safety, or any injury and/or disability arising out of or resulting from this day camp, trip or event.

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Camp Participants Name ↑

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Signature of Parent / Guardian if Participant Under 18 Years ↑

Date ↑

**\*\*Please send your child each day with a pack containing a healthy bagged lunch, water bottle, comfortable walking shoes, sunscreen, and their day camp hat.\*\***