

# Youth Expo - Saturday, June 13, 2026



## 1. PERMISSION TO TAKE PHOTOGRAPHS

In the event that photographs may be taken of myself or my child/ren during the course of participating in Youth Expo, I \_\_\_\_\_ (parent/guardian name)

(please CIRCLE ONE)

– DO GIVE permission

- DO NOT GIVE permission

for these photos to be displayed or publicized at a later date.

\_\_\_\_\_

(Signature of Parent/Guardian)

\_\_\_\_\_

(date)

## 2. WAIVER AND ASSUMPTION OF RISK I, \_\_\_\_\_

(Parent or Guardian's name)

consent to have \_\_\_\_\_

(children's name(s))

Participate in the above noted program, co-hosted by Sydenham Sportsmen's Association. As part of registering this (these) child/ren, I hereby agree as follows:

1. I acknowledge that I am aware of the risks associated with this activity and the possibilities of accident or injury which are inherent in this type of activity. I declare that my child/ren is/are fully covered by medical, dental and hospital insurance, including emergency treatment, and that I am fully protected in the case of an accident to my child/ren.
2. That I acknowledge that there are inherent risks associated with this activity and that my child/ren could sustain personal injury through participation in this activity and I am hereby accepting to take that risk on behalf of myself and my child/ren.
3. To save harmless and keep indemnified the Sydenham Sportsmen's Association, their directors, and members as well as the Youth Expo organizing committee and their respective agents, officials, servants, and representatives from and against all claims and actions, costs and expenses and demands, in respect of injury, loss or damage or death to myself or my child/ren's person.
4. That I affirm that my child/ren is/are in good health, capable of participating in the program and activities of the Sydenham Sportsmen's Association, and I accept personal risk on behalf of myself and my child/ren for the consequences of such participation.
5. That I agree that my child/ren will act in an appropriate manner and follow with the appointed group and group leader for the Youth Expo day.
6. In the event of an accident or medical problem suffered by my child/ren, I consent to appropriate medical care by Youth Expo volunteers with Standard First Aid Certificates.
7. That I declare this Waiver and Assumption of Risk is binding on me, my child/ren, my heirs, executors, administrators and assigns.

**I have read this Waiver and Assumption of Risk and I fully understand all aspects of it.**

\_\_\_\_\_

(Signature of Parent/Guardian)

\_\_\_\_\_

(date)