



LIGHTHOUSE COMMUNITY CENTRE
240 Lions Way, Qualicum Bay, V9K 2E2
778-424-9900 www.communityhall.ca

Informed Consent

Dear Parent/Guardian of Registrant:

Thank you for choosing to use the Lighthouse Community Center Society, our facilities, services and programs.

Our goal is to make your child's participation in this program both enjoyable and educational. The program facilitators and volunteers will make every effort to prevent accidental injuries from occurring. However, some injuries do occur simply because a participant may make an error in their own judgment or an accidental occurrence may result between 2 or more participants that are beyond the control of our staff or volunteers.

Program facilitators will always be in attendance; however, participants are permitted and encouraged to make their own decisions based upon their knowledge of the activity, their skill level and especially their knowledge of personal safety and the safety of others. We request your understanding and cooperation to maintain both the safety and health of your child by reviewing the information provided below and by discussing safe practices with your child before and after each session.

By signing this document you will be acknowledging that you have been informed about the activity and the potential for an accidental injury to occur to your child.

Your child's participation in this activity may be affected and /or limited as a result of other factors such as his or her willingness to participate in the activities, your child's physical development, illness and or a medical or a physical condition. As a parent / guardian you have an obligation to inform the program leader of any limitations or injuries that your child may have and at any time during the course of this program. Please note parents/guardians have the right to inquire, at anytime, about the program activity including supervision and education of rules including safety measures.

Like many other activities, participants can be accidentally injured without fault. Some of the potential injuries that can occur include:

- Risks associated with physical exertion
- Weather extremes and environmental factors subject to sudden and unexpected change
- Taking part in and playing games, sports, and activities in parks, trails, the facility, and other outdoor locations and the normal risk of injury associated with such games, sports, and activities.



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Parent/Guardian Acknowledgement

I, _____ declare that my child _____
Intends to participate in the above activity and use some or all of the facilities,
programs and services offered by the Lighthouse Community Center Society. I
understand that each person, (my child included), may have different capacities for
participating in such activities, facilities, programs and services. I am aware that all
activities, services and programs offered are educational and recreational.

I understand that part of the risk of injury to my child is relative to their state of
fitness and /or health (physical, mental or emotional), including their awareness, care
and skill with which my child conducts themselves during the activity or program. I
acknowledge that my child's choice, with my permission, to participate, brings with it
the assumption and understanding, by me, of the risk of an accidental injury that
may occur during the activity or program that is beyond the control of the
recreational staff and volunteers.

In addition, I understand that I am free to withdraw my child from, reduce or modify
involvement in any program activity and I realize that I should do so upon recognition
of any signs of transient lightheadedness, fainting, chest discomfort, leg cramps,
nausea, etc and to bring these sign to the attention of the program leader.

In addition, I acknowledge that I have inquired about the nature of any activity,
program or services that I am not completely familiar with and I have been informed
and of any inherent risks.

By signing this document, I/We exonerate Lighthouse Recreation, the Recreation
Coordinator, and all persons associated with facilitating this program, including the
board of directors of the Lighthouse Community Center Society.

I declare that I have read, understood and agree to the contents
of this INFORMED CONSENT AGREEMENT in its entirety.

Parent/Guardian

Signature

Email address

Date

Program: _____