

## TRIP RELEASE FORM

Assumption of Risks, Waiver and Release of Claims, and Indemnity Agreement (the "Release")

## PLEASE READ CAREFULLY

BY SIGNING THIS RELEASE, YOU AND	YOUR CHILD GIVE UP CERTAIN LEGAL
RIGHTS, INCLUDING	
	m the parent or legal guardian of give permission for my child to travel and
participate in Fort McKay Education Departm	· •
Event/Field Trip	Date(s)
Moose Lake Culture Camp	

In consideration of my child being permitted to travel and participate in events/trips, I agree, on behalf of myself, my Child, my heirs, assigns, personal representatives and next of kin as follows:

- 1. My Child and I are aware that the travel, event or field trip may involve various RISKS and DANGERS. We understand that known and unknown risks and dangers associated with my or my Child's participation in this activity may result in personal injury, death, property damage, or loss. We also understand that personal injury, death, property damage or loss may be caused or contributed to by the NEGLIGENCE OR CARELESSNESS of others.
- 2. My Child and I assume and accept, without limitation, all risks and dangers associated with my or my Child's participation in the travel and field trip activities.
- 3. For myself and for my Child, I waive any and all claims against Fort McKay First Nation, and its Chief, Councillors, officers, employees, agents, consultants, and representatives (all of whom are collectively referred to in this document as "Fort McKay") arising from or connected, directly or indirectly, with my or my Child's presence at or participation in the travel/field trip.
- 4. For myself and for my Child, I release Fort McKay from any and all liability for any loss, damage, injury or expense that I or my Child may suffer or incur by reason of



my or my Child's presence at or participation in the travel/field trip due to any cause whatsoever, including negligence on behalf of Fort McKay, or other participants, or anyone else.

- 5. **I will indemnify and hold harmless** Fort McKay from any and all liability for loss, damage, injury or expense suffered or incurred by myself, my Child or anyone else in connection with my or my Child's presence at or participation in this activity.
- 6. If, in the event of an accident or emergency, I am unavailable to provide consent, I authorize Fort McKay to provide to my Child any and all such health care services as Fort McKay deems necessary.
- 7. My Child and I agree that Fort McKay has the right to enforce appropriate standards of conduct throughout the travel/field trip, and I authorize Fort McKay to take such disciplinary or other action against my Child that may be reasonably necessary to maintain those standards. I recognize that if either I or my Child violate those standards, Fort McKay may determine that either or both of us may no longer participate in the travel/field trip.
- 8. As a courtesy to Fort McKay, I agree to pick up my Child promptly upon completion of the travel/field trip.
- 9. I have carefully read the contents of this Release and understand the terms and conditions outlined, and, knowing of Fort McKay's reliance on the Release, agree that my Child and I shall be bound by its terms. I hereby affirm that the consent of no other party is required to grant the right for my Child to participate in the travel/field trip.

I HAVE READ THIS DOCUMENT THOROUGHLY.

My Child and I understand that by signing this document, my Child and I are giving up important legal rights, including the right to sue.

We understand that Fort McKay is relying on this full release and waiver of all claims when accepting my or my Child's participation in the travel/field trip.

Date:	
Parent/Guardian Signature:	Print Name:
Child's Signature:	Print Name:
Signature of Witness:	Printed Name: