



REGIONAL DISTRICT OF CENTRAL KOOTENAY

# Parental Consent Form - Program

To: Regional District of Central Kootenay (the "RDCK")

Re.: Summer Camps (the "Program")  
(Insert name of program)

Date(s) of Program: Jul 2 – Aug 31, 2018

Name of Child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

I consent to my child's participation in the Program. I am aware that there are risks associated with participation in the Program, including the risk of injury, and I consent to my child's participation in spite of such risks.

In the event that my child requires medical attention, I consent to my child being transported to the nearest emergency centre, including by ambulance if necessary.

Permission is hereby  **Granted** or  **Not Granted** (please check appropriate box) for the RDCK and/ or its Program partners to take and use photographs of the above-mentioned child for promotional and records purposes.

**I have read this Parental Consent Form and understand and accept its terms.**

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Parent's Name (please print)

\_\_\_\_\_  
Witness Name (please print)

\_\_\_\_\_  
Date (please print)