



**INFORMED CONSENT/PERMISSION FORM FOR
TIM HORTON CHILDREN'S FOUNDATION SCHOOL EXCURSIONS**
(Students Under the age of Majority)

The _____ is arranging
(name of school)

_____ on _____
(describe activity) (dates)

THIS FORM MUST BE READ AND SIGNED BY EVERY STUDENT WHO WISHES TO PARTICIPATE AND BY A PARENT OR GUARDIAN OF A PARTICIPATING STUDENT.

The activities involved in the **Visit** may include, but are not necessarily limited to:

Low-energy activities such as: nature exploration; campfires; gardening; drama programs; pottery; arts & crafts; indoor games; classroom and computer activities

High-energy activities such as: fitness activities; hiking; indoor and outdoor sports; open recreation periods; field sports; mountain biking, ice skating, tobogganing, kick sledding, snowshoeing and special camp-wide games and events

Climbing activities involving heights such as: rock climbing; climbing towers; use of high and low ropes challenge courses; indoor wall-climbing and zip lines

Water activities such as swimming in oceans, lakes and pools; boating; canoeing, kayaking and sea-kayaking; sailing; tubing; knee-boarding; paddle boating; fishing and white water rafting

Target activities such as archery

Camping activities such as overnight outdoor camping trips; portaging and outdoor living skills

Farming and ranch activities such as horseback riding; caring for and feeding of farm animals

ELEMENTS OF RISK:

Educational activity programs, offered by Tim Horton Children's Foundation, Inc. involve certain elements of risk. Injuries may occur while participating in these activities. The following list includes, but is not limited to, examples of the types of injury which may result from participating in the activities that this facility offers.

The Attendee's participation in the **Visit** and associated **transportation**, including each of the activities listed above and offered during the **Visit** involves a **risk of injury or death** and/or **damage to or loss of property**. Individuals taking part in the **Visit** and/or their parents/guardians must assume these **RISKS**. All of the **RISKS** cannot be listed on this Form, but may include:

Participating in the **Visit** and associated **transportation** may lead to **minor or serious bodily injury** to the head, neck, back, bones, joints, ligaments, muscles, tendons, and other aspects of the musculoskeletal and/or neurological system; **injury to internal organs**; and **injury or impairment to other aspects of the body, general health, and well-being**. Participating in the **Visit** may also lead to an impairment of the Attendee's future ability to study, work and earn a living; to engage in other business, social, personal, intimate and recreational activities; and generally to enjoy life.

Participating in the **Visit** and associated **transportation** may lead to Other Risks. Other Risks may include those associated with **limited availability of immediate medical assistance; and the possible conduct of other participants, whether or not it is negligent or reckless; and the contraction of a contagious illness or communicable disease**.

Participating in the **Visit** may lead to additional **risks not described above**.

The risk of sustaining these types of injuries result from the nature of the activity and can occur without any fault of either the student, or the school board, its' employees/agents or the Tim Horton Children's Foundation, Inc., it's employees, agents, officers or directors of the facility where the activity is taking place. By choosing to take part in this activity, you are accepting the risk that you/your child may be injured.

The chance of an injury occurring can be reduced by carefully following instructions at all times while engaged in the activity.

If you choose to participate in _____ on
(describe activity)

_____, you must understand that you bear the responsibility for any injury that
(dates)
might occur.

The _____ and the Tim Horton Children's Foundation, Inc., **do not** provide
(name of school boards)
accidental death, disability, dismemberment or medical expense insurance on behalf of the students participating in this activity.

PHOTOGRAPHY

All photographs, film, video, or other audio-visual recording taken of the Attendee by the Foundation or its agents shall be and remain the sole and exclusive property of the Foundation and may be stored, maintained, used, modified, published or broadcast in any medium now known or hereafter devised, without payment or compensation by any one or more of the following, namely, the Foundation, The TDL Group Corp., Tim Hortons Advertising and Promotion Fund (Canada) Inc., Tim Hortons USA Inc., The Tim's National Advertising Program, Inc., their affiliated or related entities, and their advertising and promotional agencies.

ACKNOWLEDGEMENT

WE HAVE READ THE ABOVE. WE UNDERSTAND THAT IN PARTICIPATING IN THE ACTIVITY DESCRIBED ABOVE, WE ARE ASSUMING THE RISKS ASSOCIATED WITH DOING SO.

Signature of Student: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

PERMISSION

I give _____ permission to participate in the _____
(name of student) *(description of activity)*

to be held on or about _____.
(date)

Signature of Parent/Guardian: _____ Date: _____