



**INFORMED CONSENT AND RELEASE OF LIABILITY
TORONTO PREP SCHOOL
HEALTHY ACTIVE LIVING EDUCATION AND PERSONAL FITNESS
CLASSES 2014 - 2015**

Student Name: _____ Date of Birth: _____

Emergency Contact: _____ Phone Number: _____

OHIP Number: _____

Release of Liability and Assumption of Risk

Physical education classes and associated activities and events including, but not limited to various field and team sports, skating, martial arts, yoga, bowling, beach volleyball and self-defense instruction may present various elements of risk.

Some of these activities can be high-to-low risk and I understand that the activities my child will participate in can be inherently dangerous and may cause serious or grievous injuries, including bodily injury, damage to personal property and/or death. Incidents related to such activities may occur and cause injury, through no fault of the Toronto Prep School, or the facility at which any activity or event is being held. Participants must assume these risks. Toronto Prep School does not provide any accidental death, disability, dismemberment, or medical expenses insurance on behalf of students participating in any of these activities.

Should your child suffer injury or illness while participating in this program, the undersigned hereby authorizes any representative of Toronto Prep School to authorize such medical attention for your child as may be deemed appropriate by said representative given the circumstances. The undersigned agrees to bear the costs of all medical care and procedure required by his/her child. The undersigned also agrees to maintain appropriate medical coverage for his/her child while participating in all aspects of the program. The undersigned hereby releases Toronto Prep School, its directors, officers, volunteers and employees from any claim arising out of any medical treatment his/her child may require.

The undersigned also agrees to accept and fully assume the cost of any willful property damage caused by his/her child. The undersigned is not withholding any medical condition that could endanger his/her child's health while participating in any and all aspects of this program.

I have carefully read this Informed Consent and Release of Liability Waiver and understand the terms and conditions of it and agree to be bound thereby. My child has my permission to participate in all activities and events associated with the Healthy Active Living Education Program and Personal Fitness classes at the Toronto Prep School as outlined above for the 2014 - 2015 academic year (September 2nd, 2014 to June 30th 2015).

Signed this _____ day of _____, 201__

Student's Signature

Parent's/Guardian's Name

Parent's/Guardian's Signature

Transportation

A variety of methods of transportation may be used when students are participating in the Toronto Prep School Healthy Active Living Education Program and Personal Fitness classes at other schools/fields and venues. Transportation methods may include, but are not limited to: school van, school bus, luxury coach, walking, public transportation, or private vehicle.

I hereby give permission for my child to take all the above mentioned forms of transportation to all events and activities as required.

Parent's/Guardian's Initials _____