



Activity Waiver

Parent/Guardian Name: _____

Parent/Guardian Name: _____

Student Name: _____

I/We, the aforementioned parent(s) or guardian(s), grant our child permission to participate on all field trips, clubs, sports teams, and outings/activities during their stay in Canada. Outings and activities include those planned by Golden Hills International staff, their homestay family or dormitory staff, and/or their school. Students participating on outings or activities that are (1) overnight or (2) outside of Alberta will require additional permission.

Activities and outings may include (but are not limited to) skiing, snowboarding, skating, tobogganing, swimming, camping, hiking, boating, fishing, amusement park rides, horseback riding, rollerblading, soccer, baseball, football, hockey, volleyball, basketball, and all related transportation.

I/We understand that our child is prohibited from participating in certain activities that are not covered by their medical insurance while in Canada. These activities include motorized contests of speed, parachuting, skydiving, hang gliding, bungee jumping, cave exploring, mountaineering, rock or cliff climbing, or scuba diving; operating any type of aircraft or travelling as a passenger on any non-commercial flight; operating any form of motorized transport on land or water without a licence valid for the area where operating; and travelling in or on a motorcycle, snowmobile, or any kind of vehicle while racing or off-road. I/We understand that should my/our child participate in such activities, loss or injury incurred while engaging in such activities will not be covered by medical insurance and that I/we will be fully liable for all related expenses. The insurance exclusions are subject to change without notice and will be stipulated on the insurance policy; I/we agree to comply with these changes.

As the parent(s)/guardian(s) of the student mentioned above, I/we understand the risks involved in participation on field trips, clubs, sports teams, outings, and activities, and absolve Golden Hills International and Golden Hills School Division of any liability or financial obligation resulting from loss or injury.

By signing below, I agree that I have read, understand, and agree to all terms of the Activity Waiver.

Parent/Guardian Signature

Parent/Guardian Signature (if applicable)

Date

Date