



GIRL GUIDES ENGINEERING BADGE DAY: PARENTAL PERMISSION FORM

This form MUST be signed by a parent or legal guardian of any child participating in specially organized ONWiE youth programs at Western University. Once completed please send this to Kelsey Lavigne, Women In Engineering Outreach Programs Coordinator, by May 1, 2019 in order for your child to be able to participate.

NAME OF CHILD: _____
(First Name) (Last Name)

I understand that the University, its representatives and ONWiE will take all reasonable steps to provide individual care and safety for each child, but I am aware the University and ONWiE, its offers, employees, agents and volunteers cannot assume responsibility for any injury, loss, damage or harm to any child or to her property during the course of any activity which is part of the Girl Guides Badge Day program, including traveling to and from the University Campus.

I understand and acknowledge that certain risks and injury, loss, damage or harm are inherent to participating in any program or activity and I agree to indemnify and save harmless Western University, its officers, employees, agents, volunteers and the ONWiE Badge Day organizers from and against any injury, loss, damage or harm that may befall my child(ren) as a result of their participation in this program UNLESS such injury, loss, damage or harm is caused by the SOLE NEGLIGENCE of the University, ONWiE or its representatives, while acting within the scope of their duties.

I hereby grant permission for my child to fully participate in the Girl Guide Engineering Badge Day Program. I declare having read and understood the above and hereby consent to my child participating on the basis described. Western Engineering is solely responsible for the use and protection of any and all personal information collected from registrants.

Printed Name of Parent/Guardian Signature of Parent/Guardian Date

EMERGENCY CONTACT INFORMATION

Name/Relationship Contact Number

PHOTOS will be taken throughout the Badge Day. Permission is hereby given for any photos of my child to appear in the program brochure or in any other advertising publication by the University

Yes No (If NO, a red dot will be placed on the name tag to avoid being photographed)

Please describe any allergies or medical conditions.

