Town of Aurora - Information and Waiver

In order for any student to participate in the **Recreation and Healthy Active Living Leadership** program through **ASK Online Canada and Town of Aurora**, it is a requirement for both the student and a parent / guardian to complete the following **Town of Aurora Information and Waiver** form, signed by the parent / guardian of each student participant or by the student if over the age of majority (18).

Na	me of Student:			
1.	I consent to the Town taking photographs and other forms of digital media ("Media") of myself and/or my child/ward and consent to the Town using such Media for the purpose of marketing Town's Programs and other Town initiatives			
	Yes	No		
2.	On behalf of myself and my child/ward, I assign and transfer to the Town, any and all proprietary rights, including copyright, and waive all personality rights, which I may have or my child/ward may have in the Media.			
	Yes	No		
3.	Do you/your child have any allergies?			
4.	4. Who is the participant's emergency contact?			
	Name:		_ Phone Number:	
5.	Does the participant have a disability or unique need that you would like to disclose? If yes, please li diagnosis.			
Wa	aiver			
wh	•	or arise from participa	<u> </u>	ng from any accidents or injury med above, during any program or in
Na	me of Student (PF	RINT):		
Pro	ogram: Recreation	and Healthy Active Li	ving Leadership	
Na	me of Parent / Gu	ardian (OR student ove	er 18) (PRINT):	
Sic	nature of Parent/	Guardian (OR student o	over 18):	Date: