

**INFORMED CONSENT, RISK ACKNOWLEDGEMENT
AND INDEMNITY AGREEMENT**

WARNING: By signing this document you indicate that you understand the risks associated with the activity(ies), and you are aware that by allowing your child to participate in the activity(ies) you are exposing him/her to the risks identified below. It gives Engenuics authority to secure medical assistance for your child for which you agree to be financially responsible. You are agreeing to assume financial responsibility for any damage to third persons or their property caused by your child.

PLEASE READ ALL INFORMATION CAREFULLY!

ACTIVITIES: Which may include, but are not limited to, any or all of the following: **Computer Usage, Soldering, Flying Drones, Building Projects, Outdoor Physical Activity.** (Hereinafter referred to as "the Activities" throughout this Agreement)

I am aware that by allowing my child to participate in the **activity(ies)** of **Engenuics Technologies Inc** ("Engenuics") **summer camps** I will be exposing my child to the following inherent risks, including but not limited to:

General:

- Theft, vandalism, damage or loss of personal property.
- Any manner of harm, injury, illness, death or property damage suffered by or resulting from:
- Use, misuse, non-use and failure of any equipment;
- Travel by motor vehicle, bus or any other means of transportation to, from, or during the activity(ies);

Engineering or Science Experiments:

Any manner of injury, illness or death resulting from:

- The use of various laboratory equipment/instruments such as burners, soldering irons, lasers, glue etc.;
- Fumes from chemicals, erecting, dismantling or use of any equipment;
- The use of various building materials and tools/equipment.

Computer Usage:

- Access to the Internet allows for the complete freedom of expression and viewpoints from all elements of society. A wide variety of text and images are shared by millions of users worldwide. In its current format, the Internet is a completely uncensored source of information. It is important to discuss this with your child before attending class;
- Engenuics has no way of restricting access to material on the Internet while attending the class. Any attempt by your child to access pornographic or other inappropriate material during class, will result in your child being expelled and the parent/guardian being contacted;
- I understand that there are resources accessible on the Internet which are not appropriate for minors. I agree to allow my child to access the Internet for the purpose during the program unless otherwise directed in writing to Engenuics.

I have explained the risks associated with this activity to my child and he/she understands the risks.

1. Engenuics may secure such medical advice and services as it, in its sole discretion, may deem necessary for my child's health and safety and I shall be financially responsible for such medical advice and services.

2. I understand that it is my child's responsibility to abide by the rules and regulations imposed on the participants by the Instructor. I have explained to my child the need to follow the instructions given by the instructor.
3. I agree to HOLD HARMLESS AND INDEMNIFY Engenuics Technologies Inc and its employees from any and all liability for any damage to the property of, or personal injury to, any third party resulting from my child's participation in the activity(ies).

MEDIA RELEASE

1. I consent for my child to be included in photographs, video, tape, print and/or other similar material (the "Materials") and further agree to the use and distribution of the Materials, and any copies, for advertising, trade or educational purposes in any Engenuics' publications, broadcast or other media.
2. I agree that Engenuics may reproduce the Materials, and that the original and any copies of such Materials will become Engenuics' sole property.
3. I understand that I will receive no compensation for Engenuics' use and distribution of the Materials.
4. I further agree and release Engenuics from all liability in connection with the usage of any of the Materials and from all liability which I may have against Engenuics.
5. I acknowledge that I, the parent/guardian, am under no obligation to consent and agree that it is my voluntary decision to do so. I also understand that having given my permission, I may also withdraw it at any time by notifying Engenuics in writing, provided that Engenuics shall continue to have my consent to distribute any Materials which have already been produced or that Engenuics has committed to producing prior to the withdrawal.
6. I certify that I have read and fully understand this release and consent agreement. I certify that all questions pertaining to this consent have been answered to my satisfaction. By signing below, I am agreeing to the terms of this agreement.

I CONFIRM THAT I HAVE READ AND UNDERSTAND THIS AGREEMENT AND THAT I AM AWARE THAT BY SIGNING THIS AGREEMENT, I AM ACCEPTING FINANCIAL RESPONSIBILITY FOR ANY MEDICAL ASSISTANCE ENGENUICS MAY DEEM NECESSARY FOR MY CHILD'S HEALTH AND SAFETY AND ALSO FOR ANY DAMAGE TO THIRD PERSONS OR THEIR PROPERTY THAT MY CHILD MAY CAUSE.

Signed this _____ day of _____, _____.

CHILD'S NAME

PROGRAM

SIGNATURE OF PARENT OR GUARDIAN

PARENT OR GUARDIAN NAME (please print)

WITNESS SIGNATURE (Non Family Member)

WITNESS NAME (please print)

WITNESS ADDRESS

WITNESS TELEPHONE #

This Agreement must be completed in full, without alteration, signed, dated and witnessed, before the child may participate in the activity(ies).

INFORMATION – Please complete all information in GREEN

Child's Name			
Parent/Guardian's Name			
Program Title & Dates			
Alberta Health Care Number			
Other Care Provider (if applicable)			
Emergency Contact 1 (required)			
First Name		Last Name	
Address			
Email			
Home Phone		Work Phone	
Emergency Contact 2 (optional)			
First Name		Last Name	
Address			
Email			
Home Phone		Work Phone	

Medical History

Please describe any physical, medical or other limitations that may affect this person's full participation in this program (diagnosed or undiagnosed). Include if the participant has a history of any of the following: Asthma, Pneumonia, Heart Disease, Epilepsy, Diabetes, Hypoglycemia, Dislocations, Joint Problem, Autism, Depression, ADHD, ADD, ODD. Please provide any additional information you feel we should be aware of and any strategies to help.

Allergies

Please list any allergies this person may have and the severity of each one. If there are no allergies, put an 'N/A' in the field.

Medications

Please list any current medications this person is taking and how each should be administered. Engenuics is not responsible for ensuring your child takes required medications. Engenuics cannot assist with administering medications that require needles, injections, or contact with bodily fluids.