


Permission Form

This form must be completed by a person with a legal caregiving relationship to the campers that are coming to Moomba. That person may be a social worker, legal guardian, or parent. **Purple Stars indicate where we need information filled out by you!** Please read this information thoroughly, complete the required sections, and sign when completed.

Who is coming to camp?	I agree that I have the responsibility and authority* I need to give these camper(s) permission to attend Camp Moomba;	
Consent & participation	I give permission for the camper(s) listed above to attend YouthCO's Camp Moomba, Winter Edition on March 7 & 8, 2020, at Evans Lake Forest Education Centre;	
Complete information	I agree that I have provided all information asked of me to the best of my ability , including accurate emergency contact information and all relevant information to ensure the safety of my camper(s) and others at camp;	
Camper expectations at Moomba	Along with the camper(s) listed above, I have read and agree to follow the community agreements in place at camp. I understand if the camper(s)' behaviour during or after camp does not follow these agreements, they will be asked to participate in accountability work that may or may not include their removal from camp during this session and/or for future sessions;	
Please circle yes, not applicable, or no to the following statements:		
Health Care & First Aid	I consent to nurses providing the medication I have listed and provided as prescribed to my camper(s);	yes not applicable
	I consent to nurses providing over the counter medications to my camper(s) as required based on their clinical judgement;	yes no
	I consent that in the event of my camper(s) illness or injury during Camp, camp staff or volunteers may provide first aid as required, and/or seek emergency medical treatment or other appropriate assistance;	yes no
No ability to make legal claims	I waive any and all claims that I or the camper(s) may have against YouthCO HIV & Hep C Society, Camp Moomba, all staff and volunteers in this program, and release YouthCO HIV & Hep C Society, Camp Moomba, all staff and volunteers in this program, and staff at supplies including Evans Lake Forest Educational Centre and Lynch Bus Lines from any and all liability for any loss, damage, expense or injury that I or the camper(s) may suffer, resulting from the camper(s)' participation in Camp Moomba; I agree to indemnify and hold harmless YouthCO HIV & Hep C Society, Camp Moomba, all staff and volunteers in this program, and each of them from any and all liability resulting, in whole or in part, from the camper(s) participation; and	
<div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="text-align: center;">  </div> <div style="text-align: center;"> <p>I HAVE READ THIS AGREEMENT, AND HAD THE CHANCE TO ASK ANY QUESTIONS I NEED BEFORE AGREEING TO THE INFORMATION PROVIDED HERE.</p> <p>Print Name: _____</p> <p>Sign: _____</p> </div> <div style="text-align: center;"> <p>Date: _____</p> </div> </div>		



*Some campers may live with foster families or caregivers who are not authorized by the Ministry of Children and Family Development (MCFD) to make decisions about program participation for these youth. **We are happy to work with social workers and legal guardians at MCFD to ensure every camper can attend. If you are not sure if you are the right person to fill out this form, please contact Sarah Chown at sarahc@youthco.org.**