



CITY OF COURTENAY

Recreation Services
489 Old Island Highway
Courtenay, BC V9N 3P5
Tel: 250-338-5371

VOLUNTEER PROGRAM PARENTAL CONSENT FORM

Parents are required to fill out this form for any minor under the age of 19 who is participating in a Volunteer Program with the City of Courtenay. Please return this signed form prior to volunteering.

CONTACT

NAME OF CHILD		BIRTHDATE	
PARENT NAME			
ADDRESS			
PHONE			
EMAIL			

EMERGENCY CONTACT

NAME		CELL PHONE	
HOME PHONE		ALTERNATE	

MEDICAL CONDITIONS

I acknowledge that it is my responsibility to advise Courtenay Recreation of any medical conditions which may affect my child's participation in the Volunteer Program and have listed them below:

MEDICAL CONDITIONS	
MEDICATIONS	
ALLERGIES	
OTHER	

CONSENT

I am aware that there are risks associated with participation in stated program, including the risk of injury, and I consent to my child's participation despite such risks. I consent to my child's participation in Courtenay Recreation's Volunteer Program. **I have read this consent form and understand and accept its terms.**

PARENT NAME (PRINT)	
SIGNATURE	
WITNESS NAME (PRINT)	
SIGNATURE	

This collection of personal information is authorized under the *Local Government Act, Community Charter* and section 26(c) of the *Freedom of Information and Protection of Privacy Act*. The information will be used for processing this form. Questions can be directed to the City's Privacy Officer at: 830 Cliffe Avenue, Courtenay, BC V9N 2J7, t. 250-334-4441, e. info@courtenay.ca