The Duke of Edinburgh's International Award - Canada **Parent Acknowledgement Waiver and Agreement**



PARTICIPANT WAIVER AND AGREEMENT

- I will select the activities I will perform in order to achieve an Award.
- I will not attempt to perform any activity until I have made certain that I can perform it safely
- I acknowledge that no one is authorized by The Duke of Ed Award Program to advise as to the safety of any activity or as to whether I am capable of performing it safely, or to supervise or exercise any control or authority over me or any other participant. As a participant I assume full responsibility of such matters.
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| Award Program from any and all liab performing any activity in connection of Québec). | each individuals and legal entities involved in The Duke of E wility of any kind for any injury I might suffer while in with the Award Program (this does not apply to residents at as long as I am participating in The Duke of Ed Award |
|--|---|
| I agree to the above terms listed in the lagree that my name and other informaticipation in The Duke of Ed may | |
| promotion of the Award Program. I agree to the above terms | |
| PARENT ACKNOWLEDGEMENT & INFORMATION (for participants under the age of 18) | TION* |
| foregoing Waiver and Agreement, and we ag thereof. We will assure ourselves that the pa | uke of Ed participant listed above. We have read the gree on behalf of ourselves and the participant to the terms articipant is aware of and understands the terms thereof. It is aware of the risks involved in each activity and we take m for each activity. |
| Parent/Guardian Name | |
| Parents/Guardian Phone Number | |
| Parents/Guardian Email | |
| | |

I am the Parent/Guardian and I agree to the above terms *Required for participants under the age of 18