

The purpose of the Women's Centre's Girls Programs (the "Programs") are to provide opportunities for girls (the "Participants") to connect with each other to build community, learn about changing the world, practice leadership and uncover their strengths and skills. We will directly address topics like gender, identity, relationships, friendships, and body image, but we will make space to discuss any questions Participants have during Program time. While human sexuality will not be a specific topic in the Programs, if Participants raise questions, they will be addressed. We will also be providing opportunities to learn arts, dance and more. The Programs are free of charge, supplies, snacks, and meals will be provided, and bus tickets are available, if needed. The Programs take place at the Women's Centre at #39 – 4th Street NE. We may go offsite into nearby communities on occasion; however, we will strive to provide advanced notice of offsite adventures, when possible.

Participants with medical/health issues, allergies and/or injuries should discuss these with their doctor and obtain their doctor's permission to participate in the Programs. Participants must inform the Programs Coordinators of any medical/health issues in the space below. Participants who require medications during Program time must be able to self-administer them. Programs Coordinators shall not be responsible for administering or regulating any medications.

The Women's Centre will attempt to reduce exposure to identified allergens, but are ultimately not responsible for any allergens that the Participant might encounter during the Programs. The responsibility for effective allergy control is the Participant's, not the Women's Centre's. The Participant must have any necessary allergy control tools (such as an EpiPen) with them each time they attend.

Prior to participating in Programs, Participants and their Guardians must sign the required forms which include: this registration form, a release of liability, an exception to confidentiality understanding, and a public relations permission form.

Name of Participant:		Signature of Participant:	Date:
Participant Age & Birth Date:	Grade in Fall 2019:	At the Women's Centre we recognize and celebrate diversity. If you are comfortable, let us know if you (Participant) define yourself as a part of the following groups. Please check all that apply:	
Medical Concerns (allergies, medications, health concerns, disabilities, etc):		<input type="checkbox"/> Indigenous, First Nations, Inuit or Métis <input type="checkbox"/> Immigrant and/or Refugee <input type="checkbox"/> Visible minority <input type="checkbox"/> Living with a disability <input type="checkbox"/> Other(s) please explain: _____	
Name of Guardian:			
Signature of Guardian:		Date:	I want to be contacted about other Women's Centre opportunities <u>Y</u> <u>N</u>
Guardian Emergency Contact #:		Guardian Email:	
Other Emergency Contact Name (First, Last & Relation):		Other Emergency Contact #:	How did you hear about us?
<input type="checkbox"/> Option: Pick Up Child My child will be dropped off and picked up by a parent/guardian or other specified adult. I am aware that it is important to pick my child up at the time the program ends, as there will be no adult supervision for my child after this time. Name: _____ Signature: _____ Other adults able to pick up my child: Name: _____ Contact Info: _____ Name: _____ Contact Info: _____		<input type="checkbox"/> Option: Child Can Walk Home My child may arrive and walk home unsupervised. I, _____, give permission for my child _____ to walk home or take public transit alone to and from Girls Programs. I understand that if, at any time, a program staff determines that she is not conducting herself in a safe, capable and responsible manner, this privilege will be revoked. Signature: _____ Date: _____	

Release of Liability and Assumption of Risk: Girls Programs at the Women's Centre

The Participant named below, with the express approval of their Guardian, desires to participate in Girls Programs (the “**Programs**”) provided by the Women's Centre at #39 – 4th St NE, Calgary, AB or at various other locations in and around the City of Calgary. As lawful consideration for the Women's Centre accepting the undersigned (the “**Participant**”) for participation in the Program, the Participant and their Guardian agree to all the terms and conditions set forth in this agreement (the “**Release**”).

The Participant and their Guardian acknowledge that the Participant is voluntarily participating in the Programs and accept and assume any and all risks of injury, death, or property damage, whether caused by the negligence of the Women's Centre or otherwise.

The Participant and their Guardian expressly waive and release any and all claims, now known or hereafter known, against the Women's Centre, and its officers, directors, employees, volunteers, agents, affiliates, members, successors and assigns (collectively, the “**Releasees**”), on account of injury, death or property damage arising out of or attributable to participation in the Program whether arising out of the negligence of the Women's Centre of any Releases or otherwise. The Participant and the Guardian covenant not to make or bring any such claim against the Women's Centre or any other Releasee and forever release and discharge the Women's Centre and all other Releasees from liability under such claims.

The Participant and the Guardian declare that they have had the opportunity to seek independent legal advice with respect to the matters addressed in this Release. The Participant and the Guardian further declare that they fully understand this Release and have not been influenced by any representations or statement made by or on behalf of the Women's Centre.

All matters arising out of or relating to this Release shall be governed by and construed in accordance with the laws of the Province of Alberta.

BY SIGNING, PARTICIPANT AND GUARDIAN ACKNOWLEDGE THAT THEY HAVE READ AND UNDERSTOOD ALL OF THE TERMS OF THIS RELEASE.

Name of Participant

Signature of Participant

Date

Name of Guardian

Signature of Guardian

Date

Girls Programs – Confidentiality Expectations

We will try and make the Girls Programs a safe place for girls to talk about their hopes, dreams, fears and troubles. Part of making it a safe place is making sure the things girls share with us are not shared outside of the program. Everything girls share with Girls Programs Coordinators and volunteers and staff at the Women's Centre is confidential, but there are a few exceptions we want you to know about.

Participant, if we know that you or another child is being hurt by an adult, in danger of some kind, or if we are worried that you are going to harm yourself, then we have a legal duty to report it to someone outside of the program who can help. These people may include but are not limited to: your parent or guardian, Child and Family Services, the Calgary Police Service, and/or medical professionals (eg. a doctor or a nurse).

This is not meant to scare you, but just to make sure you know what Girls Programs staff and/or volunteers have to do if we hear about these things. Your safety is our first priority.

Please sign below to show that you understand our requirements regarding exceptions to confidentiality.

Participant's Signature: _____ Date: _____

Guardian's Signature: _____ Date: _____

PUBLIC RELATIONS/PRESS/PHOTO RELEASE PERMISSION FORM

Dear Girls Programs Participant/Guardian,

During the year, photographs and video of the Women's Centre Girls Programs will be taken for publication in our newsletters and other media. This includes the Women's Centre web site, Facebook page, and @girlsleadyc Instagram account. Note that any photographs or videos taken will not be sold or used for commercial distribution. Please sign below indicating your permission to include your name and/or photo/video in such press releases.

PLEASE PRINT

Participant's Name: _____

Guardian's Name: _____

Address: _____

Postal Code: _____

Phone Number: _____

I give my permission to be/to have my child interviewed, photographed, or videotaped for public relations efforts and/or news in accordance with this press release permission form.

I do not give my permission to be/to have my child interviewed, photographed, or videotaped for public relations efforts and/or news in accordance with this press release permission form.

Participant's Signature: _____ Date: _____

Guardian's Signature: _____ Date: _____