

NAIG TEAM SASKATCHEWAN

PARTICIPATION CONSENT FORM

I, _____ hereby affirm I wish to participate in the Youth Leadership Through Sport's fitness testing, strength training, and skill development clinics. I realize my participation in this activity involves risk of injury, including but not limited to bodily injuries. I recognize there are many other risks of activity that may arise due to participation in this activity, and it is not possible to specifically list each and every individual injury risk. I understand and appreciate the risks and reasonably anticipate them. I hereby, assume the explained risks of injury that could occur by reason of my participation in these strength and conditioning sessions and do now hold NAIG Team Sask, or their agents, responsible in the event of injury during the Youth Leadership Through Sport clinics.

I understand I need to bring proper workout clothing and indoor footwear.

Date: _____

Participant Name _____

Phone Number: _____

E-mail Address: _____

Emergency Contact: _____

Phone Number: _____

Relationship: _____

Participant's Signature
(if participant is over 16): _____

Parent's Signature
(if participant is under 16): _____

PHOTOGRAPHY CONSENT

Photographs/ film of you, and your name, can be used for communications materials associated with the, NAIG Team Saskatchewan (NTS), in related reports and presentations, social media, newsletters, brochures, website. These materials may be available in printed and electronic formats. Where appropriate, NTS may disclose these materials to third parties assisting us in developing training programs, campaigns and communications material.

By signing the release form below, or if you are under the age of 16 your parent on your behalf, you understand and agree to the conditions of this release form and indemnify NTS against any claim under the release.

Participant's Signature
(if participant is over 16): _____

Parent's Signature
(if participant is under 16): _____