



Summer 2024 Permission Form

Fun events are happening at the Dam all summer long!! This permission form needs to be filled out and returned to us if youth is attending any off site events. Please note youth will be driven in staff vehicles to get to event locations. If you need to contact us you can call our main office at (905) 826-6558 (extensions; Jill - 212; Khemroy - 216; Chanel - 217)

Youth Name(s): _____ / _____

Parent/Guardian Name: _____

Address: _____

Parent/Guardian Phone: _____

Youth mobile number (if applicable): _____

Emergency Contact Name: _____

Address: _____

Phone: _____

Health Card Number(s): _____ / _____

Trip supervisors may act as my agent to engage such medical and hospital care as may be required. I agree to reimburse The Dam for any out-of-pocket expenses incurred as a result of a medical emergency. Trip supervisors are requested to note the special medical information following:

Permission is given to the Dam for the youth to participate in events. Please initial beside any events that you are signing your child up for and giving permission for youth to attend. Specific outing details including supplies, cost and timing will be provided separately. Estimate costs below.

JULY:

July 3 Celebration Sq _____

July 5 Swimming _____

July 10 Jack Darling Park _____

July 11 Drive in Movies (LATE, \$5) _____

July 17 Activate (\$25) _____

July 19 Swimming _____

July 24 Bowling (\$15) _____

July 26 Swimming _____

July 31 ROM/TO (\$5) _____

AUGUST

August 1 Drive in Movies (LATE, \$5) _____

August 7 Wonderland (LATE, \$55) _____

August 9 Swimming _____

August 16 CNE (\$30) _____

August 21 Hilton Falls (\$5) _____

August 28 Farm Visit _____

If the supervisor deems the young person's behavior so disruptive and/or inappropriate as to warrant cancellation of his/her trip privileges, I agree that he/she will be returned home at my/our (the parents/guardians') expense. I will not hold The Dam, it's designated leaders or drivers liable for any injury or damage incurred while my child participates in The Dam's events.

Signature of Parent/Guardian: _____

Date: _____



Media Release Consent Form

Name or Names of Family Members (please print clearly):

_____	_____
_____	_____
_____	_____
_____	_____

Program Location: ☐ Cooksville
☐ Meadowvale
☐ Other (please specify): _____

There will be occasions when photographs and pictures in other media will be taken of participants in our programs and activities. These could appear in our newsletters or brochures, local newspapers, or video.

I hereby give permission for The Dam to use photographs or any other media representation of me at the discretion of The Dam. I release The Dam, its Officers, Directors, Co-ordinators, staff and volunteers from any and all responsibility/liability that may arise as a result of the use of such photos/media.

Parent/Guardian: _____ (print name)

_____ (Signature)

Witness _____ (print name)

_____ (Signature)

Date _____

Youth (18) years or older: _____ (print name)

_____ (Signature)

Date _____

Authorizing persons may cancel or change the above authorization(s) in writing at any time.

Please email this completed form to communications@thedam.org.