

# Club de Sauvetage Parlee Beach Lifesaving Club



## Formulaire d'inscription Membership form

Nom/Name:	# athlète/athlete #:
# Téléphone /Phone #:	DDN/DOB:
Courrier électronique/email:	
Adresse/Address:	
Contact en cas d'urgence/Emergency Contact 1:	
Contact en cas d'urgence/Emergency Contact 2:	
Allergie/Allergies:	
Médicament en cas d'urgence/Emergency medication:	
Condition médical/Medical condition:	

### Activity Waiver Form

THIS ACTIVITY WAIVER FORM (the "Waiver") dated this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

PARLEE BEACH LIFESAVING CLUB IS RELEASED OF LIABILITY, in CONSIDERATION of being allowed to participate in the Activity and other good and valuable consideration, the receipt of which is hereby acknowledged, I \_\_\_\_\_ of \_\_\_\_\_ (the "Athlete") agree with Parlee Beach Lifesaving Club of New Brunswick (the "Activity Provider") to the following:

- (1) Scheduled from \_\_\_\_\_, 20\_\_ to \_\_\_\_\_, 20\_\_, the Athlete will be participating in the following activity: Lifesaving Sport at Parlee Beach provincial Park and the Dieppe Aquatic and Sports Centre (the "Activity") provided by the Activity Provider.
- (2) Being of lawful age, or as agreed to and permitted and consented to by their legal guardian, and in consideration of being permitted to participate in the Activity, the Athlete acknowledges and s/he/they understands the following:
  - a) that lifesaving sport is dangerous and that there are risks, dangers and hazards inherent in lifesaving competition and in training, preparing for and traveling to and from such competition. These risks include, but are not limited to, the risk of severe or fatal injury to the Athlete. The Athlete acknowledges that he or she or they will be undertaking all activities pursuant to this Agreement at his or her or their own risk and agrees to assume all risks associated with, and incidental to, the Athlete's participation in lifesaving training and competition as a member of the Junior Lifeguard Program Team;

Initials: \_\_\_\_\_ (*Athlete or legal guardian*)

- b) Parlee Beach Lifesaving Club does not carry or provide insurance to protect the Athlete in the event of death, injury, damage, loss of income, medical expenses or travel claims. The Athlete acknowledges that it is the sole responsibility of the Athlete to provide at their expense all appropriate insurance coverage for the activities undertaken by the Athlete pursuant to this Agreement;

Initials: \_\_\_\_\_ (*Athlete or legal guardian*)

- c) Parlee Beach Lifesaving Club is not liable to the Athlete for any loss or damage to any property of the Athlete, however caused, nor will the Parlee Beach Lifesaving Club be liable to the Athlete in the event of the Athlete's death, for any loss or damage arising from an injury to, or death of the Athlete resulting from any activity undertaken by the Athlete pursuant to this Agreement;

Initials: \_\_\_\_\_ (*Athlete or legal guardian*)

- d) Agrees to indemnify and hold harmless the Parlee Beach Lifesaving Club and its directors, officers, employees, contractors, volunteers and agents from and against any and all liability, claims, losses, damages, and expenses which the Parlee Beach Lifesaving Club may suffer or incur as a result, directly or indirectly, of any activity undertaken by the Athlete pursuant to this Agreement. This indemnification survives termination or expiry of this Agreement.

Initials: \_\_\_\_\_ (*Athlete or legal guardian*)

- e) By initialing, the Athlete or their legal guardian acknowledges having read, understood and agrees with subparagraphs (a), (b), (c) and (d) above.

Initials: \_\_\_\_\_ (*Athlete or legal guardian*)

- (3) This Waiver will be governed by and construed in accordance with the laws of the Province of New Brunswick.

**Parent(s) or legal guardian signature(s)** : \_\_\_\_\_  
: \_\_\_\_\_

**Witness** (*Activity Provider affiliate*) : \_\_\_\_\_

Date : \_\_\_\_\_



## **Athlete Release: Agreement and Authorisation for Athlete to be in Media**

The Parlee Beach Lifesaving Club develops and trains members to participate in Lifesaving Sport. The age of our members range from as young as 8 years old, in our junior program, to over 30 years old, in the master's division. Athletes 14 years of age and older can compete in Lifesaving Sport provincially, nationally, and even internationally at events such as the World Championships. We coach members from southeast New Brunswick, and in the summer, we train at Parlee Beach Provincial Park.

Parlee Beach Lifesaving Club may capture images, videos and sound recordings of the members of the Parlee Beach Lifesaving Club for use in its reports, marketing and media advertisements (Including Facebook and Instagram), and funding requests. In those documents, we speak of the sport and our activities within the community. The advertisements are also used to promote the Parlee Beach Lifesaving Club activities to the community as we try to grow and reach more members.

We would like to obtain your consent to take and publish pictures of you or your child during the summer 2024 Junior Lifeguard Club Program and the fall, winter and spring program, from July 3rd, 2024 to July 3rd 2025. Any parent or legal guardian of our participants that does not wish to have their picture or their child's picture taken will have their wish respected.

If you have any questions about the Parlee Beach Lifesaving Club requiring the consent for taking pictures, please feel free to contact us.

Sincerely yours,

Marcel Bourgeois  
President, Parlee Beach Lifesaving Club  
506-377-4227

### **Consent To Take Pictures**

I, \_\_\_\_\_ (*name of parent or legal guardian of the minor named below*), have legal authority to execute this Agreement on the minor's behalf. I have read and fully understood the contents of this Agreement, and I consent to the said use of images and sound recordings on the contents of this Agreement by the Parlee Beach Lifesaving Club to take and publish pictures and/or videos of my child, \_\_\_\_\_ (*full legal name of child*) during the summer and winter 2024 Junior lifeguard program sessions. I authorize the pictures to be used for the purpose of the reports, marketing and the media advertisements of the Parlee Beach Lifesaving Club.

Parent(s) signature(s) : \_\_\_\_\_  
: \_\_\_\_\_

Witness (*Parlee Beach Lifesaving Club affiliate*): \_\_\_\_\_

Date: \_\_\_\_\_

## CANADIAN LIFESAVING AND EMERGENCY RESPONSE CHAMPIONSHIPS

### Waiver & Release Form

*Please read carefully before signing*

1. **Conduct**

I agree to abide by the rules, regulations and code of conduct of the championship, and further to behave in a manner consistent with ideals of good sportsmanship.

2. **Voluntary Assumption of Risk**

As a competitor in a lifesaving sport competition, I recognize that there are certain risks inherent in the activity as a result of factors including but not limited to, stress, number of people, water temperature and conditions. I have prepared myself for the competition and know of no factor or condition which should be disclosed to the organizers or which would make it unsafe for me to compete. I voluntarily assume all risks, both physical and legal including but not restricted to, loss of or damage to property, and personal injury including permanent disability or death.

3. **Waiver of Liability**

As a condition of entry and in consideration of my application as an individual or as a part of a team being accepted, I hereby waive my right to make any claim in perpetuity, whether for negligence or otherwise against the Lifesaving Society, the host, the facility operator, owner or occupier, the sponsors, the organizing committee or any of the servants, agents, affiliates, volunteers, judges, officials or other persons involved in the organization or running of the competition, events or associated activities. I further agree to indemnify and hold harmless all of the above, from any claim made on my behalf or as a result of injury to my person or property. I recognize that competitors are responsible for their own medical coverage.

4. **Model Release**

I transfer to the Lifesaving Society all rights whatsoever which I have in photographs and/or videos which photographers may have taken. I consent to the use of the photographs/videos, the publishing of my name for all purposes whatsoever, including without limitation, television, publications, and any trade or advertising purposes.

*I have carefully read and understood the four conditions of entry and in consideration for being allowed to compete, I have executed them voluntarily intending to be bound thereby and intending these conditions to be binding of my heirs, personal representatives and assigns.*

Print Name	Signature	Date
Athlete		
Parent or Guardian (if athlete is under 18 years of age)		
Witness		

## LIFESAVING SPORT CANADIAN ATHLETE REGISTRATION FORM

First name				Last name		
Street address						
City				Province		
Postal code						
Phone		Phone type	Date of birth (YY MM DD)		Gender identity	
Language Preference (EN or FR)						
Email				Club / Affiliate name		
<p>To register as an athlete, the following three documents must be submitted with this application:</p> <ol style="list-style-type: none"> <li>1. Proof of age (minimum of 13 years) <ul style="list-style-type: none"> <li>▪ Proof is official Canadian or Provincial government-issued identification that includes, name and date of birth. Athletes wishing to be considered for the National Team must provide proof via a birth certificate, permanent resident card, or Canadian Passport.</li> </ul> </li> <li>2. Current (within 24 months) Lifesaving Society award <ul style="list-style-type: none"> <li>▪ Eligible awards are Bronze Medallion, Bronze Cross, National Lifeguard (any option), or Distinction.</li> <li>▪ A copy of the certification card or Find a Member printout is acceptable proof.</li> </ul> </li> <li>3. Signed Athlete Waiver</li> </ol>						
<p><b>DECLARATION:</b> I declare that the information on this application is true.</p> <p><b>Note:</b> Athletes who have not reached age of majority in the province of their permanent residence must have the application signed by a parent or legal guardian.</p>						
Athlete name		Signature		Date (YY MM DD)		
Signed at (City & Province)						
Parent / Guardian name if athlete is not an adult		Signature		Date (YY MM DD)		
Signed at (City & Province)						
OFFICE USE ONLY						
Type of birthdate proof		Agency issuing certificate			Confirmed by	
Lifesaving Award		Date certified		Certifying P/T Branch		
Confirmed by						
Waiver & Release date received		<input type="checkbox"/> Athlete <input type="checkbox"/> Parent / Guardian <div style="text-align: center;">Signed by</div>			Confirmed by	

Mail, fax or email to: