



YOUNG MEN'S ADVENTURE WEEKEND
JULY 12 - 15, 2012

Last Name: _____ First Name: _____

Address: _____

City: _____ Postal Code: _____

Home Phone: _____ Cell Phone: _____

Email: _____ Date of Birth: (day) _____ (mo) _____ (yr) _____ Age now: _____

Sponsor Name: _____ Sponsor Phone: _____

Have you attended the *Young Men's Adventure Weekend before*: yes no # of years attended: _____

Do you have any wilderness experience: yes no Give details: _____

List any **physical disabilities or medical** conditions that you have – (e.g.: allergies, asthma, etc. - if no write no)

_____ Prescription medications: _____

List any special **dietary** requirements that you have – (e.g. Vegetarian, no dairy, no nuts, allergies, etc. - if no write no)

REGISTRATION FEE

Young Men's Adventure Weekend Registration fee is \$175.00. (non-refundable) Cheques ONLY payable to "**YMAW Society**"

AGREEMENT - Read this agreement carefully and ***initial*** in the spaces provided

_____ I understand this weekend takes place in a wilderness setting and will be physically demanding at times.
Initial

_____ I will not bring any illegal substances, materials, weapons, tobacco products or alcohol.
Initial

_____ I will ensure the safety for myself and others at all times
Initial

_____ I will participate to the best of my ability.
Initial

_____ I understand that failure to comply with the above agreement may result in my immediate removal from the
Initial ***Young Men's Adventure Weekend 2012***

Participant's signature: _____ Date: _____

Young Men's Adventure Weekend Society of B.C.

Vision: Creating healthy communities by building strong, spirited young men who can become great husbands, fathers and leaders.

Bernard Leclair 604 722 0211

www.ymaw.com



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PARENT / GUARDIAN CONSENT FORM

This section is to be completed by the parent or legal guardian.

Participant's name: _____

Parent / Guardian's name: _____

Address (if different from participant): Apt: _____ Street: _____

City: _____ Province: _____ Postal Code: _____

Relationship to participant: _____

Telephone: _____ - _____ - _____ Other: _____ - _____ - _____

Emergency contact person: _____

Emergency telephone: _____ - _____ - _____ Participant's health number: _____

Doctor's name: _____

Doctor's number: _____

If participant takes medicine, please state names and purposes: _____

Are there any other allergies, physical or medical problems that your young man has?

I approve of this participant attending the *Young Men's Adventure Weekend* – July 12-15, 2012

Signed: _____ Date: _____

Parent Guardian (Please check one)

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RELEASE AND WAIVER OF LIABILITY

The organizers of the Young Men's Adventure Weekend 2010 (referred to as "the sponsors") are producing an event for Young Men ("Participants"). We require the participants and their parent or guardian to read and agree to the following:

As Parent or Guardian for participant _____
(Print parent/guardian name)

- 1. We confirm that the Participant has voluntarily agreed to participate in the Young Men's Adventure Weekend.
- 2. We understand that the activities involved in the Young Men's Adventure Weekend will be physically demanding at times and that personal injuries or property damage may occur.

3 CONSENT FOR EMERGENCY MEDICAL TREATMENT OF A PARTICIPANT:

In the event of an emergency, if we cannot be reached by telephone, we hereby give permission to a representative of the Young Men's Adventure Weekend to arrange for any medical treatment required by PARTICIPANT while he is attending the Young Men's Adventure Weekend, July 12-15, 2012. We will be responsible for any emergency medical treatment costs.

- 4. We have no reservations about the Participant's physical fitness or health that would prevent him from participating in physically demanding activities. We have advised the Sponsors of any relevant physical condition or disability of the Participant (including food or other allergies).
- 5. We understand that the Young Men's Adventure Weekend takes place in a wilderness setting and includes such activities as hiking, campfires, games, using tools, swimming, and traveling to and from the site. We acknowledge the risks inherent in this setting and in these activities and recognize that serious personal injuries, damage to personal property or even death may occur. We agree to assume those risks and release the Sponsors from any responsibility.
- 6. We hereby release and discharge the Sponsors (and other persons authorized by them to help produce the Young Men's Adventure Weekend) from all claims that we, the Family, the Participant, or our personal representatives may have for any injury (including injury resulting in death) or disability sustained by the Participant, however caused. We release and indemnify the hosts/owners/occupiers as the case may be, and all of them, of the site at which the event is held, from liability for any and all loss, injury or damage the participant or his parent or guardian may sustain, no matter how it is caused. We also release the Sponsors (and other persons authorized by them to produce the Young Men's Adventure Weekend) as well as other participants from any responsibility for loss of, or damage to the Participant's personal property. We agree not to make any claim for any loss, injury or damage we, the participant, the parent and guardian may sustain in connection with the event, no matter how such loss, injury or damage may occur.
- 7. We agree that all photographs/videos taken of my Young Man during the Young Men's Adventure Weekend are the property of the Young Men's Adventure Weekend Society of BC. These can be used at the discretion of the YMAW Society of BC.

Signatures:

Print name:

Parent/Guardian: _____

Participant: _____

Witness: _____

Date: _____

YMAW SOCIETY INC# S-40533

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