

Indigo Sudbury Campus Visitation Policy

Any person who wishes to visit the Indigo Sudbury Campus is asked to contact the Attendance Clerk (Nicolette) and let her know when s/he would like to visit. Nicolette will check with the Visit Committee and, in the case of an adult, make sure a staff member will be available to meet with the Visitor.

Student visitors are asked to have the "Under 18" waiver forms filled out and signed by their parents. These forms will be kept on file in the event that the Visitor returns for subsequent visits.

Memorandum concerning a Day-Visit to the Indigo Sudbury Campus

You may be considering having your son/daughter visit the Indigo Sudbury Campus for a day. We want you to be aware of the special nature of the Indigo Sudbury Campus before you agree to allow your child to visit with us. In particular, we want to point out that the Indigo Sudbury Campus does not undertake a duty to directly supervise its students and/or its visitors to the Campus. While Staff do pay attention to what is happening at the Campus and strive to notice any dangerous situations or activities that may arise, it is our educational philosophy that all students, regardless of age, are independent and responsible individuals and therefore are responsible for their own actions and activities. This educational philosophy will apply to your child while s/he is at our Campus.

Following are forms that include a Supervision Waiver, a Visitor's Release, Medical Consent and a High Risk Activities Waiver. Please review, sign and deliver these forms to the Attendance Clerk prior to or on the day of your son/daughter's visit.

Please be aware that your son/daughter will be expected to abide by the Campus Lawbook and be respectful, responsible and reasonable.

If you have any questions, please feel free to contact us at 780.761.1130.

Visitor's Request Form (under age 18)

We wish _____, age _____, date of birth: _____
to have the opportunity to visit the Indigo Sudbury Campus on _____
from _____ to _____ (approximate times).

Supervision Waiver: We have read the memorandum concerning visiting the Indigo Sudbury Campus and understand that the Campus does not undertake a duty to directly supervise its students or visitors.

Release: In consideration of the Indigo Sudbury Campus allowing _____
(the visitor) to visit the Campus, subject to the limitations in the Visitor's Request and the code of conduct described in the Campus Meeting Lawbook which by this reference are incorporated in this document, the undersigned visitor and the undersigned parents and/or legal guardians of the visitor on the behalf of themselves, their heirs, their estates, executors, administrators and assigns do hereby **RELEASE, REMISE AND FOREVER DISCHARGE, INDEMNIFY AND AGREE TO HOLD HARMLESS** the Indigo Sudbury Campus, its officers, staff members, agents, servants, employees, volunteers, mentors, directors and/or any one or more thereof against any claim, demand or cause of action whether now in existence or hereafter arising for any loss of health, loss of property, inconvenience, delay, injury to the person of, or for the death, wrongful or otherwise, of the visitor arising out of, resulting from, caused by, occurring during or in any way connected with the Campus visit, whether or not such injury, death or damage is caused by or contributed to in whole or in part by any action or failure to act, negligence, breach of contract, or other misconduct on the part of the Campus, its officers, staff members, agents, servants, employees, volunteers, mentors, directors and/or any one or more thereof. In case any provision in this contract and release shall be invalid, illegal or unenforceable, the validity, legality and enforceability of the remaining provisions shall not in any way be affected or impaired thereby. The undersigned visitor and the undersigned parents/guardians intend this contract and release to take effect as a sealed instrument and to be governed by the laws of the Province of Alberta.

Medical Consent: We, the undersigned, understand that the Indigo Sudbury Campus does not undertake a duty to provide on-site medical treatment to students or visitors. If, in the opinion of the staff member, a volunteer, mentor or other responsible person at the Campus, a medical emergency arises, this Campus representative will attempt to contact the parents or legal guardians of the student/visitor and if, in the Campus representative's reasonable judgment the student/visitor's condition warrants it, arrange transportation of the student/visitor to an appropriate medical facility for treatment. To that end, we authorize a representative of the Campus to consent on our behalf to the medical treatment for _____ by a licensed physician, nurse, paramedic, or hospital staff member.

Visitor's Alberta Health Care number: _____

If the student has any allergies, diseases, handicaps, disabilities or restrictions that should be known to the Campus, please describe them here:

By affixing our signatures below, we agree that we have read and we understand and agree to the information presented on Page 1 of the Visitor's Request Form.

(Parent/guardian signature)

(Parent/Guardian signature)

Both parents/guardians must sign this form unless the signing parent has sole custody.

Please print name

Please print name

Date: _____

Date: _____

Address: _____

Address: _____

Phone(hm/cell): _____

Phone (hm/cell): _____

Phone(wk): _____

Phone(wk): _____

Emergency contact: _____ Phone: _____

I agree as a visitor to follow the rules of the Indigo Sudbury Campus and accept responsibility for my conduct. I have read or have had read to me the memorandum concerning visiting the Indigo Sudbury Campus, and I understand that the Campus does not undertake a duty to supervise its students or me during my time at the Campus.

(Signature of Visitor)

Schedule B - Potentially Dangerous Activities Release

We understand that the following **potentially dangerous activities** are available to _____ (the student) at the Indigo Sudbury Campus:

- Trampolining (Note: The trampoline may be sitting on concrete.)
- Ice skating
- Skateboarding
- Bicycling (Note: Youth under the age of 18 years are **required by law** to wear a helmet.)
- Unicycling (Note: Youth under the age of 18 years are **required by law** to wear a helmet.)
- Walking on stilts
- Rollerblading
- Using power tools
- Going off-campus to neighborhood stores and other sites
- Going off-campus to neighborhood parks & playgrounds

We understand that _____ (the student) will not necessarily be under the direct supervision of an adult while engaging in these activities.

Indigo Sudbury Campus recommends the use of helmets however we accept that it is up to us as a family to decide whether or not _____ (the student) must wear a helmet for ice skating, skateboarding, walking on stilts and rollerblading. **We understand that no one will monitor the use of helmets and that it will be up to _____ (the student) to respect the family decision.**

We further understand that these activities are inherently dangerous involving a **risk of injury, paralysis or death**, and we further understand that, by signing this release, we have voluntarily waived any right we may have or have had, to bring any claim, demand or cause of action, including, but not limited to, any claim, demand or cause of action in tort, contract, equity, or under statute. We acknowledge that we have had an opportunity to consult with a lawyer.

In consideration of the Indigo Sudbury Campus providing an opportunity for _____ (the student) to engage in the above-noted potentially dangerous activities, the undersigned student and the undersigned parents/guardians of the student on behalf of themselves, their heirs, their estates, executors, administrators and assigns do hereby **RELEASE, REMISE AND FOREVER DISCHARGE, INDEMNIFY AND AGREE TO HOLD HARMLESS** the Indigo Sudbury Campus, its officers, staff members, agents, servants, employees, volunteers, mentors, directors and/or any one or more thereof against any claim, demand or cause of action whether now in existence or hereafter arising for any loss of health, loss of property, inconvenience, delay, injury to the person of, or for the death, wrongful or otherwise, of the student arising out of, resulting from, caused by, occurring during or in any way connected with the aforesaid activity, whether or not such injury, death or damage is caused by or contributed to in whole or in part by any action or failure to act, negligence, breach of contract, or other misconduct on the part of the Campus, its officers, staff members, agents, servants, employees, volunteers, mentors, directors and/or any one or more thereof. In case any provision in this contract and release shall be invalid, illegal or unenforceable, the validity, legality and enforceability of the remaining provisions shall not in any way be affected or impaired thereby. The undersigned student and the undersigned parents/guardians intend this contract and release to take effect as a sealed instrument and to be governed by the laws of the Province of Alberta.

We believe _____ (the student) is responsible and reasonable enough and conscious enough of safety to be allowed to engage in the following activities at Indigo Sudbury Campus, **regardless of the level of supervision.** (Parents, please do not sign this if you have any doubts as to the level of responsibility, reasonableness and safety of your child!)

Please **initial** the activities you are willing to allow your son/daughter to participate in at ISC:

- I allow _____ to _____ participate in **ALL** the activities listed below. _____ (Parents' initials)

OR

I allow _____ to participate in the following activities:

- Trampolining Yes _____ No _____
- Ice skating Yes _____ No _____
- Skateboarding Yes _____ No _____
- Bicycling Yes _____ No _____
- Unicycling Yes _____ No _____
- Walking on stilts Yes _____ No _____
- Rollerblading Yes _____ No _____
- Using power tools Yes _____ No _____
- Going off-campus to neighborhood stores and other sites Yes _____ No _____
- Going off-campus to the neighborhood parks & playgrounds Yes _____ No _____

We have read and fully understand the Potentially Dangerous Activities Release and by signing below, we give _____ (the student) permission to participate in the activities we have initialed above.

WITNESS our signatures and seals this _____ day of _____, 20____.

Student: _____ Print name: _____

Parent/Guardian: _____ Print name: _____

Parent/Guardian: _____ Print name: _____