



UNDER 18 FORM

A student who is under the age of 18 must have this form completed. Please return the completed form to the physical education/health education teacher.

PARENT(S)/GUARDIAN(S) DECLARATION:

- (1) I understand that there are risks of injury associated with all types of physical activity. I have reviewed the recommended safety guidelines for the physical activities chosen by my child and have discussed them with my child. (Recommended safety guidelines are available online at Manitoba, Education, Citizenship and Youth website <http://www.edu.gov.mb.ca/k12/cur/physlth/out-of-class/index.html>, Appendix D – General Safety Guidelines/Appendix E – Physical Activity Safety Checklist.)
- (2) I understand that the recommended safety guidelines are believed to reflect best practice and are considered minimum standards for physical activity in an organized or formal setting. They may not apply to all situations (e.g., home-based, recreational, or modified activities). I may deem my child sufficiently trained and competent to adapt the guidelines. In the case of organized programs, instructors, coaches, or program leaders of out-of-class physical activities may impose more stringent safety standards.
- (3) I am aware that divisional personnel will not inspect the facilities or equipment to be used by my child for the non-school-based physical activities he/she may have chosen for the out-of-class component of this course, and I will be responsible for ensuring, to the extent reasonably possible, that they meet the recommended safety standards as is appropriate for the non-school-based physical activities he/she may have chosen for this course. (Non-school-based activities are home, community, or independently based activities that are not directly organized by the school or school division, such as community sports, classes and clubs, and exercising at home.)
- (4) I am aware that divisional personnel will not be present or in any way involved in supervising my child while he/she participates in the non-school-based physical activities he/she may have chosen for the out-of-class component of this course, and I will be responsible for ensuring, to the extent reasonably possible, that my child receives the level of instruction and/or supervision, while participating in non-school-based physical activities, appropriate to his/her chosen activities.
- (5) I will encourage my child to abide by the recommended safety guidelines as is appropriate for the physical activities he/she has chosen for the out-of-class component of this course and any other more stringent safety standards imposed by his/her instructors, coaches, or program leaders while he/she is participating in his/her chosen physical activities for the out-of-class component of this course to ensure, to the extent reasonably possible, that no one is injured and no property is damaged or lost by reason of my child's participation in the out-of-class component of this course.

- (6) I understand that I will be responsible for any and all fees that may result from my child's participation in physical activities for the out-of-class component of this course.

PARENT CONSENT:

Having considered my child's mental and physical condition, and the risks and suitability for him/her of the physical activities he/she has chosen for the out-of-class component of this course, I consent to my child participating in his/her chosen physical activities.

I have read, understand, and agree with the above statements.

Parent Signature (if student is under 18 years of age)

Date\

STUDENT DECLARATION:

- (1) I am aware of the recommended safety guidelines for the physical activities that I have chosen, and will abide by them, as is appropriate based on the nature of the activity (e.g., recreation versus competition), and any other more stringent safety standards imposed, when applicable, by my instructors, coaches, or program leaders.
- (2) While participating in my chosen physical activities for the out-of-class component of this course to ensure, to the extent reasonably possible, that no one is injured and no property is damaged or lost as a result of my participation in my chosen physical activities for the out-of-class component of this course.

I have read, understand, and agree with the above statements:

Student's Legal Last Name

First Name

Middle Initial

Signature