



The Duke of Edinburgh's International Award – New Brunswick
Adventurous Journey Registration

Name:

Address:

Phone:

Email:

Birthdate:

Emergency Contact Name & Phone:

NB Medicare #:

Do you have any medications, allergies, dietary restrictions, or special needs?

Level of Award you are currently working on:

Group Name or Independent:



RELEASE, ACKNOWLEDGMENT AND ASSUMPTION OF RISK FORM

I understand that during my participation in my Duke of Edinburgh's (hereafter referred to as the Award) adventurous journey I may be exposed to situations and environmental conditions where the stresses and hazards may be greater or different than those I normally encounter. I also understand, that although the Award has taken precautions to provide proper organization, supervision, instruction and equipment for the journey, circumstances may arise which are not foreseeable or which are beyond the control of the Award. I acknowledge that the Award cannot guarantee absolute safety. I also understand that I am, in part, responsible for my own safety and I agree to comply with the instructions and directions of the Award staff members during the journey.

I hereby assume all of the risks arising out of, incidental to or in any way connected with my participation in the journey, including, but not limited to, any risks which are not foreseeable.

I have accepted responsibility to verify with my physician that I do not have any physical or psychological problems which would impair my ability to participate in the journey or would create undue risk to myself or others who may depend upon me during the journey.

Code of Conduct for All Participants

The Code of Conduct outlines expected behaviour during activities. A participant is defined as "any person, who is involved in an activity in any capacity."

1. The Duke of Edinburgh's Award will not tolerate acts of discrimination and/or harassment on the basis of race, national or ethnic origin, colour, age, religion, sexual orientation, marital status, family status, disability or conviction of an offence for which a pardon has been granted.
2. The emotional, physical, verbal or sexual abuse of any participant or staff will not be tolerated.
3. Any material that may be deemed a "weapon" will be confiscated and the individual will be sent home immediately.
4. The privacy of the individual is to be maintained at all times. No person shall disregard another's privacy as it regards to personal belongings, accommodation or hygiene facilities.
5. No participant will engage in acts of criminal or civil disobedience as outlined by the laws of Canada, for example; theft, vandalism, assault, etc.
6. Actions and behaviours that jeopardize the safety of the participant, staff or the group will not be tolerated.
7. Any violation of this Code of Conduct will be cause for disciplinary measures and may result in the participant being sent home at his/ her own expense. In the case of expulsion, no portion of fees is refundable.

I have read the Code of Conduct and agree to comply with the above while participating in events/activities. I further understand that any violation of the Code of Conduct will be cause for disciplinary measures and if such results in my being sent home, that it is done so at my own expense

I, _____ hereby acknowledge and agree that being permitted to participate in the activities of The Duke of Edinburgh's Award (hereafter referred to as the Award) is based on my agreement to the following conditions:

1. I do hereby release The Duke of Edinburgh's Award, its Members, Officers, Directors, Employees, Volunteers and Independent Contractors from all liability, claims, demands and causes of action of any kind whatsoever in respect of all personal injuries, loss of life or property losses which I may suffer arising out of the activities of the Award, notwithstanding that such injuries or losses may have been caused solely or partly by the negligence of the Award, its Members, Officers, Directors, Volunteers, Employees or Independent Contractors.
2. I do hereby Acknowledge and Agree:
 - a. That adventurous journey activities (hiking, backpacking, activity courses and any activities in a wilderness area) and other related adventurous activities may be dangerous and expose me to risks and hazards.
 - b. That I freely and voluntarily assume all the aforesaid risks and hazards for myself.
3. That I have carefully read this Release, Waiver and Assumption of Risk agreement, that I fully understand same, and that I am freely and voluntarily executing same.
4. That I understand clearly that by signing this Release I will be forever prevented from suing or otherwise claiming against the Award, its Members, Officers, Directors, Employees, Volunteers or Independent Contractors.

*** I HAVE READ THIS FORM, AND I UNDERSTAND AND ACKNOWLEDGE THAT IT IS A CONDITION TO THE APPLICANT BEING ACCEPTED ON THE TRIP THAT I AGREE TO THE TERMS OF THIS RELEASE, ACKNOWLEDGMENT AND ASSUMPTION OF RISK.**

Release, Waiver and Assumption of Risk

DATE _____

Signature _____
(Applicant's Signature)

If applicant is under 18 years of age:

I (we) consent to the participation by the above-named applicant on the Award trip. I (we) make the acknowledgements, assume the risks and responsibilities and release the Award in accordance with this Release, Acknowledgement and Assumption of Risk, for and on behalf of myself (ourselves) and the above-named applicant.

Name of Parent/Guardian (Please print)

DATE _____

Signature of Parent/Guardian
