THE BOUNDLESS SCHOOL

Assumption of Risk and Liability Waiver Form

Boundless Adventures Association is hereafter referred to as Boundless. In enrolling in a Boundless high school credit program, I acknowledge that:
i. Aspects of the Boundless Program are physically demanding and strenuous
ii. The Boundless Program may necessitate operating in all types of foul weather;
iii. There are inherent risk factors in outdoor adventure activities which are an integral part of the Boundless Program;
iv. It is my responsibility to inform myself of the potential risks and injuries I could encounter as a result of my participation in this program;
v. During the term of the Boundless Program I may be traveling in remote areas where medical assistance will not be readily available and I assume the consequences of care given in this environment;
vi. It is my responsibility to carry medical insurance or a valid Provincial Health Insurance number. I fully understand that I will be responsible for all evacuation costs and expenses in the event of illness, disease, injury or other mishaps.

I confirm that I am in good health. I undertake to abide by the rules, directives and guidelines of Boundless and to indemnify Boundless, their principals, directors and Board of Directors and their personnel from any loss, damage, injury or death caused as a result of my actions, deliberate or otherwise. I acknowledge if I fail to adhere to or abide by the rules, directives and guidelines of Boundless I may be barred from further participation or required to withdraw, in either of which events I shall not be entitled to any reimbursement of monies paid or receive any credit or partial credit for my participation.

Based on the aforementioned acknowledgments and undertakings, I assume full responsibility for all risks and other eventualities, and in so doing hereby release and forever discharge Boundless, their principals, directors and Board of Directors and their personnel from any and all claims, demands, actions and causes of action related to or arising out of my participation in the Boundless Program or while traveling to and from the location of same. I further undertake to fully indemnify and hold Boundless, their principals, directors and Board of Directors and their personnel safe and harmless from any costs or expenses which they may incur as a result of any claim, demand or action if pursued.

Consent is hereby given for the student to participate in all aspects of the Boundless Program (unless otherwise noted) and permission is given to Boundless officials to act on my (the student's) behalf as necessary in the case of illness, injury, mishap or accident during this course. This includes but is not limited to, first aid treatments, dispensing of non-prescription medications and salbutamol and the injection of epinephrine.

COVID -19 has been declared a worldwide pandemic by the World Health Organization and by the Federal, Provincial and Municipal governments throughout Canada. The Government of Ontario has implemented strict guidelines which when followed, allow businesses including Boundless to open and provide services during this pandemic. Boundless has implemented a series of protocols that adhere or exceed those Provincial guidelines and will continue to monitor and amend their protocols to maintain full compliance with all level of governmental regulations. However, Boundless cannot guarantee that you will not contract COVID during your tenure.

In light of the above, I PRINT STUDENT"S FULL NAME HERE specifically acknowledge and agree that I am aware that by participating in Boundless programs I may be at an increased risk of contracting COVID -19. Notwithstanding I PRINT STUDENT"S FULL NAME HERE forever release and indemnify Boundless from any and all claims relating to my potential exposure to COVID-19 or from potential infection by COVID-19 as a result of my attendance/participation at Boundless or from any action or negligence on by me or others including all staff and employees of Boundless.

_____ _____ _____
Name of Participant in Full (please print) ***Signature*** ***Date***

If you are under eighteen years of age, your parent or guardian must complete the following.

I, the undersigned as the responsible parent or guardian of the above named participant who is under eighteen years of age, hereby acknowledge confirm and accept all of the above terms and consequences herein contained for and on behalf of same as well as myself.

1_____ _____ _____

2) _____ _____ _____
Name of both Parents/Guardians in Full (please print) ***Signature*** ***Date***

In executing this Agreement I acknowledge that I have fully read and understand its terms and consequences, that I have the right to legal advice and that I am signing same on my own free will and volition and not being under any undue pressure or duress to do so.

_____ _____ _____
Name of Participant in Full (please print) ***Signature*** ***Date***

If you are under eighteen years of age, your parent or guardian must complete the following.

I, the undersigned as the responsible parent or guardian of the above named participant who is under eighteen years of age, hereby acknowledge confirm and accept all of the above terms and consequences herein contained for and on behalf of same as well as myself.

1) _____ _____ _____

2) _____ _____ _____
Name of both Parents/Guardians in Full (please print) ***Signature*** ***Date***