



# PETERBOROUGH NEW HORIZONS BANDS

## Waiver of Parental Supervision

Please read carefully and sign.

1. My child wishes to participate in the Peterborough New Horizons Bands (hereafter PNHB). and I consent to and give permission for my child to participate in this program.
2. I hereby freely accept and assume all risks associated with the participation of my child in the PNHB. As a result of my child's participation in any PNHB band or ensemble, my said child, and we as parents/guardians, hereby waive any and all claims, expenses, demands, costs, suits, liabilities and causes of action against the Peterborough New Horizons Bands {PNHB} which may arise, and I release the PNHB from any liability in that regard.
3. I accept and agree that it is my child's responsibility to abide by the policies of the PNHB.
4. I further agree to indemnify and save harmless the PNHB and its employees and members from any and all suits, demands, claims and actions of any kind which may be brought against its employees or members for which they may become liable by reason of any injury, loss, damage or death resulting from, or occasioned to or suffered by any person or any property as a result of any act, neglect or default of my child.
5. I hereby accept responsibility for costs involved with the PNHB.
6. I further agree to reimburse the Peterborough New Horizons Bands for damage or theft of any instrument entrusted to my child, provided such instrument is not owned by myself or my child.
7. I acknowledge that it is my responsibility to provide supervision for my child and, should I choose not to do so, I acknowledge that my child will supervise him/herself. I acknowledge I am not relying in any way on any employee or member of the PNHB for supervision of my child while attending rehearsals or concerts.
8. I acknowledge that it is my responsibility to advise the PNHB of any medical and/or health concerns, which may affect my child's participation in the organization.



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9. I acknowledge that should I not be present and should a situation arise concerning my child's health, safety and well-being, a PNHB member will contact me and/or an alternative at the following,

Name \_\_\_\_\_ phone number \_\_\_\_\_

Name \_\_\_\_\_ phone number \_\_\_\_\_

and may take any actions deemed necessary including calling an ambulance, the police or securing medical treatment and providing transportation home for my child at my expense. The PNHB will advise the parents of any concerns as to the child's health, safety and well-being.

I hereby acknowledge that I have read and understood the foregoing and do hereby approve and consent to all of the above. I hereby give permission for my child to participate in the Peterborough New Horizons Bands program and follow and adhere to all policies of the organization.

In this waiver, "Parent" also includes "Guardian".

**SIGNED at** \_\_\_\_\_ **Ontario**

**this** \_\_\_\_\_ **day of** \_\_\_\_\_, **20** \_\_\_\_\_

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**Parent/Guardian's Name printed and signature.**

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**Signature Witness**

I have read the above and my parent or guardian has explained it to me.

**Date:** \_\_\_\_\_

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**Student's Name**

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**Signature Witness**