

Howl with the Wolves at UNBSJ

The Howl with the Wolves program is specifically designed to pair University of New Brunswick Saint John varsity athletes with local children and youth and to encourage participation and development in sport. By offering the Howl with the Wolves program, UNBSJ is attempting to expose young people to healthy lifestyles. This outreach program also aims to have Seawolves staff and/or athletes speak to student participants about the importance of physical activity, team work, respect, dedication, self-confidence and other important life skills that can be developed through sports.

Grade 5 students are invited to participate in a voluntary basketball clinic on October 9, 2013 at the Canada Games Stadium. This is organized by UNB Saint John varsity athletes to encourage participation and development in sport. The clinic will be held at Canada Games Stadium in Saint John from 3:00 to 4:30 pm. Parents will be responsible for supervising their child while at the clinic and for transporting their child to and from the clinic. This is not a school sponsored event.

Your child should bring sneakers, water bottle and warm clothes in case of cold weather. If it rains the clinic will be held inside at the gymnasium of the university.

PLEASE RETURN THIS FORM TO YOUR CHILD'S SCHOOL BY OCTOBER 7th SO THE SCHOOL CAN REGISTER YOUR CHILD FOR THE CLINIC

Student's Name: _____

Grade Level: 4 or 5

My son/daughter will participate in the Howl with the Wolves Soccer clinic at the Canada Games Stadium on Wednesday, October 9th. I will be transporting my child to and from the clinic and staying on site to supervise my child. I take full responsibility for my child's supervision and participation in this clinic and understand that it is not the school's responsibility to supervise my child at this event.

Parent's Signature _____

Emergency Phone Number _____

ELEMENTS OF RISK NOTICE

The risk of injury exists in every athletic activity. Falls, collisions and other incidents may occur and cause injury. Due to the very nature of some activities, injuries may range from minor sprains and strains to more serious injuries affecting the head, neck or back. These injuries result from the nature of the activity and can occur without fault on either the part of the student, or the school district or its employees or agents or the facility where the activity is taking place. By choosing to participate in the activity, you are assuming the risk of an injury occurring. The chances of an injury occurring can be reduced by carefully following instructions at all times while engaged in the activity. UNB Athletics dept. attempts to manage as effectively as possible the risk involved for students while participating in their clinics.

ACKNOWLEDGMENT OF RISKS/REQUEST TO PARTICIPATE/INFORMED CONSENT AGREEMENT

I/We have read and understand the notice of elements of risk.

I/We hereby acknowledge and accept the risk inherent in the requested activity and assume responsibility for my son/daughter for personal health, medical, dental and accident insurance coverages.

I/We agree that UNBSJ or its employees, servants or agents shall not be liable for any injury to my son/daughter/ward or loss or damage to personal property arising from, or in any way resulting from participation in the above listed activity.

Signature of Parent/Guardian _____ **Date** _____