

## **PARENT/ GUARDIAN PERMISSION (SG.2)**

Non-regular unit activities

Your daughter/ward has the opportunity to participate in the following Girl Guides of Canada activity/event.

ACTIVITY – Guiders please complete this activity section.

Activity/event/camp: District Thinking Day Event Date(s): From Feb 21st to 3-6pm

Location: (facility name) Moberly Arts and Cultural Centre

The details of this activity/event/camp are explained on the attached Activity Plan (SG.1).

The activity/event indicated above falls outside what Girl Guides of Canada considers to be a "regular unit activity." Our procedures require that you review the planned activity(ies) and consider the following:

- In all activities there is an element of risk. While Girl Guides of Canada and your daughter's/ward's Guider(s) take
  reasonable precautions to minimize these risks, this is no guarantee against injury or loss.
- Some of the risks associated with these types of activities include (but are not limited to): scrapes, cuts or bruises; sprains, strains or possible broken bones; illness from known or unknown sources; theft or loss of possessions; and unforeseen injuries from activities, equipment or actions of your daughter, other participants or other people, including negligent actions. Although it is unlikely, the potential also exists for debilitating injury, long-term incapacity and death.
- Your daughter/ward's Guiders will be following Girl Guides of Canada's Safe Guide which outlines safety
  management practices. You are welcome and encouraged to review this document. A copy of Safe Guide is available
  from www.GirlGuides.ca.
- Participants are expected to conduct themselves in a safe manner and to abide by the Girl Guides of Canada's Safe
  Guide procedures and Code of Conduct. Anyone who does not or whose actions jeopardize their safety or the safety
  of the group will be dealt with immediately. If appropriate, she may be sent home at the expense of parents/guardians.

Name of girl:	has my permission to participate in	
		Name of activity/event/camp
on	with the supervision arrangements outlined	d on the Activity Plan (SG.1).
List dates and times	<del></del>	
Contacts during activity: During the do	uration of the activity, I may be reached at:	
Address In the event of an emergency, if I canno	Phone t be reached, the following person is hereby authorized to	Alternate Phone
Name	Deletionable to continue to	, act c, coa
	Relationship to participant:	
Address  have read and understood the inform  GG.1). I understand that there is a de	mation provided with this form as well as the details egree of risk involved in these activities. After carefu	ally considering all the risks
have read and understood the inform SG.1). I understand that there is a derivolved, and having full confidence thild/ward, I authorize my child/ward agree to provide up-to-date health egistration. If my daughter/ward recept to secure medical advice and	mation provided with this form as well as the details egree of risk involved in these activities. After careful hat reasonable precautions will be taken for the safe to participate in the activity as described above and information that may not be on the Personal Hequires medical treatment, I understand that Girl Guid ervices and that I will be contacted as soon as poss	on the attached Activity Planully considering all the risks ety and well-being of my on the Activity Plan (SG.1). ealth Form (H.1) completed des of Canada will take initial
have read and understood the inform SG.1). I understand that there is a denvolved, and having full confidence thild/ward, I authorize my child/ward agree to provide up-to-date health egistration. If my daughter/ward recept to secure medical advice and semergency contact person noted about the secure of the se	mation provided with this form as well as the details egree of risk involved in these activities. After careful hat reasonable precautions will be taken for the safe to participate in the activity as described above and information that may not be on the Personal Hequires medical treatment, I understand that Girl Guid ervices and that I will be contacted as soon as possible.	on the attached Activity Planully considering all the risks ety and well-being of my on the Activity Plan (SG.1). ealth Form (H.1) completed des of Canada will take initial