

(Office Use Only) Participant:

Media Consent:

Group:



2017-18 GirlSpace—Registration Form

Participant's First Name Participant's Last Name Birth date (DD/MM/YYYY)

Age Participant's Email Address (if applicable)

()
Participant's Cell Phone (if applicable) School Grade 2017/18

Street Address Street/Apt # City Postal Code

Parent/Guardian Name Please Circle: Ms Mrs. Mr. Dr. Other

() () ()
Home Phone Work Phone Cell Phone

Parent/Guardian Address (if different from above). **Please include mailing address**

Parent/Guardian Email Address

How did you hear about GirlSpace? (please check one)

Recreation Guide
 SOS Children's Magazine
 the newspaper
 a friend
 School (school name _____)

The participant will be attending the following GirlSpace group (please check one):

- | | | |
|---|-------------------------------|--|
| Junior (Mondays 4 – 6 pm) | <input type="checkbox"/> Full | Ages 8 -10 (starts Sept. 11 th) |
| Intermediate-a (Tuesdays 4 – 6 pm) | <input type="checkbox"/> Full | Ages 11 -13 (starts Sept. 5 th) |
| Intermediate-b (Wednesdays 4 – 6 pm) | <input type="checkbox"/> Full | Ages 11 -13 (starts Sept. 6 th) |
| Senior (Thursdays 4 – 6 pm) | <input type="checkbox"/> | Ages 14-17 (starts Sept. 7 th) |



YWCA
NWT

GIRLSPACE

Correspondence

Throughout the year, there are many instances when Ashley or another YWCA staff may need to contact you. Common reasons are: field trips, notification of special events, notification of group cancellations or time changes, to receive consent for certain activities, and sending out consent forms and program calendars, etc.

The majority of the correspondence is done via email. However, I can appreciate not everyone uses email as a primary correspondence tool.

If you would like to be reached through another means as your *primary* communication mode, please let us know. You will still receive all the emails the whole group receives, however, you will also be contacted by the means indicated:

I would prefer the following to be my primary form of communication for the year:

Telephone

Yes, I can receive *text messages at: (# _____)

*Text messages are sometimes used to send reminders about group outings, changes in program plans, to let parents know their children have arrived at the YWCA, etc

Fax (# _____)

I do **not** have an email

I do **not** have a phone

I do **not** have a current mailing address, but will update the YWCA as soon as I do

Emailing is the best way to reach me

Participant I.D. # _____



YWCA
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Health & Safety

Are your child's immunizations current? _____

If your child has allergies, please list them and the reactions:

List medication taken on a regular basis and for what medical condition:

Are there any other medical issues we should be aware of? If so, please note them:

If there are any other behavioural and/or emotional reactions that we need to be aware of please note:

Please state any other concerns:

What are your expectations of your daughter's participation in GirlSpace? Anything in particular that you would like to see develop? (i.e. confidence, knowledge of certain topics, friends, etc)

Signature of Parent/Guardian

Date

Participant I.D. # _____



YWCA
NWT



Consent to Participate

I, _____, am committed to joining the YWCA GirlSpace program and consent to be a participant. I provide this consent knowing I need to attend and meet with the group and the leader, Ashley MacDonald, on a regular weekly basis, unless I am sick or Ashley is unable to attend. **I will contact Ashley via email, text, or by phone to let her know when I cannot attend GirlSpace.**

I understand that anything I say to Ashley is confidential, which means that she cannot tell anyone else. However, if Ashley thinks that I need help to be safe she may need to tell someone who can help me. Ashley will let me know if she needs to break confidentiality.

Since I am in a group with other people, I understand that whatever is said within that group cannot be talked about outside of the group. If I do talk about or make fun of what another person says in group, without their permission, I may be asked not to come to group the next time.

I provide this consent knowing about the activities of GirlSpace, and do so freely with the understanding that I may give or take back this consent at any time.

Signature of Youth

Date

Signature of Witness

Date

If consent is revoked, please do so in writing.

Parent/Guardian Consent

I, _____ (parent/guardian), having legal responsibility for _____ (participant), give consent for _____ (participant) to be a participant in the YWCA NWT GirlSpace program. I provide this consent having read the above Youth Consent Section, and knowing about the activities of GirlSpace, and do so freely with the knowledge that I may give or take back this consent at any time.

Signature of Parent/Guardian

Date

Signature of Witness

Date

If consent is revoked, please do so in writing.

Consent to participate in GirlSpace is required by both the youth and the parent/guardian with legal authority.

Participant I.D. # _____



YWCA
NWT



RELEASE OF LIABILITY AND ASSUMPTION OF RISKS

BY SIGNING THIS AGREEMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS INCLUDING THE RIGHT TO SUE

PLEASE READ CAREFULLY

NAME OF PARTICIPANT:

ADDRESS:

DATE OF BIRTH:

Is your daughter permitted to walk home alone? Yes No

If not, please name individual(s) permitted to pick up the participant at the end of each session:

Please indicate where the pick up will take place. Parking lot/GirlSpace Door?

We advise you that by registering your daughter in GirlSpace she will be participating in light physical activity such as classroom games and activities, and visits to the park beside Rockhill. The activities will take place at Rockhill Apartments at 4904-54 Ave, and occasionally the neighbouring park, unless otherwise indicated. Waivers will be sent out prior to any activities requiring the group to leave Rockhill (other than the nearby park visits).

Although the program activities are not considered dangerous or high risk, by signing this Agreement you will be releasing YWCA NWT from any responsibility for any accident occurring during the program hours. This waiver refers to the usual risks that are involved with the activities described above. It is yours and your daughter's responsibility to inform the program facilitator if you or she is not comfortable participating in any of the noted activities or if there is any reason why she should not participate.

Participant I.D. # _____



YWCA
NWT



THIS AGREEMENT IS A RELEASE OF CLAIMS AND BY SIGNING IT YOU:

FREELY ACCEPT AND ASSUME THE RISK OF and hold YWCA NWT its agents, officers, directors, employees, contractors and affiliated companies (collectively the “Releasees”) harmless from any liability for any physical or other injury or harm suffered by your daughter during or as a consequence of participating in such programs or performing such exercise routines or engaging in such other strenuous physical activity.

RELEASE AND HOLD HARMLESS THE RELEASEES, from any liability with respect to your daughter arising out of or connected with your daughter participating in GirlSpace due to any cause whatsoever, including negligence, breach of contract, or breach of any statutory or other duty of care, on the part of any of the Releasees.

AGREE THAT THE RELEASEES SHALL NOT HAVE ANY LIABILITY.

I hereby consent to have my child being interviewed, photographed and/or video taped by or for YWCA NWT for promotional purposes now and in the future.

By checking the following headings, you agree to have your daughter participate in:

- print media, including YWCA annual reports/newsletters/pamphlets
- photographs, including those used in print media listed above and in presentations.
- posting photographs on the internet, such as the YWCA NWT website and Facebook.
- participating in video or audio recording created by YWCA NWT and posted on the website or on You Tube.

I don’t want my child to be interviewed, photographed or recorded.

Only check this option if you did NOT check any others.

You agree that you have carefully read and understand this Agreement and in return for YWCA NWT allowing your daughter to participate in the GirlSpace Program, you agree to the foregoing.

Parent/Guardian Signature:

Date:

Participant I.D. # _____



YWCA
NWT

GIRLSPACE

The YWCA GirlSpace Code of Conduct

The GirlSpace Code of Conduct outlines appropriate behaviour while taking part in the program. You are expected to comply with all aspects of the Code. Our Code reflects our commitment to responsible behaviour for our own well-being and that of others. By participating in the YWCA NWT GirlSpace, every participant enters in agreement with the YWCA NWT GirlSpace Code of Conduct.

Respect: I agree to:

- Be respectful and honest with myself by accepting responsibilities for my own actions at all times.
- Be respectful and mindful of other participants, staff, and other adults around me by being honest and courteous to all individuals.
- Be inclusive and accepting of everybody and not discriminate against anyone's race, sexual orientation, culture, creed, color, religion, nationality, and/or ethnicity.
- Take care of public and private property, including the environment that surrounds me.
- Handle my own and other people's personal belongings with proper care.
- Respect and obey all of Canada's laws.
- Demonstrate courtesy and good judgment in with regard to cell phone usage and adhere to the following guidelines:
 - Cell phones and other hand-held devices are to be turned off and not used during GirlSpace. *Girls are permitted to use cell phones to let parents know they have arrived/are ready to leave GirlSpace.*
 - During program hours, in case of emergency, parents/guardians can communicate with participants via the facilitator's cell phone, (867) 445-7606. You can also text this number.
 - No pictures or videos are to be taken with cell phones without the subject's explicit consent.
 - The use of cell phones is expressly forbidden in washrooms and change-rooms.

Participant I.D. # _____



YWCA
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GiRLSPACE

Politeness and Courtesy: I agree to:

- Be polite and as helpful as I can be to everyone, be kind and considerate, and treat others the same way I would like to be treated.
- Not use foul and/or inappropriate language.
- Refrain from hurtful actions or attitude such as bullying, cyber bullying, harassment, ridicule, exclusion, or teasing.
- Be tolerant and open minded of other people's differences.
- Follow the group's working rule list.

Safety and Order: I agree to:

- Work, play, and behave in a safe manner that does not compromise my safety and the safety of others.
- Refrain from bringing to GirlSpace any objects that may cause harm to myself or others.
- Refrain from bringing/using illegal drugs, alcoholic beverages, and/or cigarettes.
- Always resolve any dispute or problems through discussion or with the help of an adult staff member, if need be, and to never resort to verbal or physical violence.

Disciplinary Procedures:

The youth will be expected to follow instructions from Girls Programming Coordinator, Ashley MacDonald, and behave in a courteous manner to staff, volunteers, and other youth at all times. The YWCA NWT will use the following procedures for *repetitive* misbehaviour:

1st Incident – Discussion with the youth concerning the nature of the incident and re-establish expectations/consequences.

2nd Incident – Youth will be spoken with about their reoccurring behaviour and concerns, including a discussion of the GirlSpace rules and why they are in place. A verbal contract will be arranged where the youth agrees to follow the program structure and rules from this point forward.

Participant I.D. # _____



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Parents/Guardians will be notified. Youth may be sent home for the day.

3rd Incident – The youth will be asked to leave the program for a period of one week. Parents/Guardians will be notified.

4th Incident – Parents/Guardians will be notified that the youth is no longer welcome in the program.

Please sign below to indicate that you have read, understood, and agree to the GirlSpace Code of Conduct.

Signature of Parent/Guardian

Date

Signature of Witness

Date

Participant I.D. # _____



YWCA
NWT



Consent- Response to an Emergency

EMERGENCY INFORMATION

Child's Physician: _____

Physician's Phone Number: _____

Child's Health Care Number: _____ **REQUIRED!**

Emergency Contacts, other than parents/guardians:

Name: _____

Address: _____

Phone Numbers: Home _____ Work _____

In the unlikely case of a medial emergency and the contact person is unavailable, I, _____, being the legal parent/guardian of _____, authorize the staff of the YWCA NWT to provide _____ with the required medical care. I provide this consent freely with the knowledge that I may give or revoke consent at any time.

I, _____ am the parent/guardian of, _____ Herby authorize the staff of the YWCA GiRLSpace program to have my child transported to Stanton Territorial Hospital for emergency or a non-emergency situation which requires medical treatment, in the event that parents/guardians, or designated emergency contact person cannot be reached. I am aware that this decision will be made by a YWCA Director or Executive Director. As well all cost incurred by the transportation of my child will be paid by the parent or guardian.

Signature of Parent/Guardian

Date

Signature of Witness

Date

Note: If consent is revoked, please do so in writing.

Participant I.D. # _____