## **Parent/ Guardian Consent Form**



## Nova Scotia Islamic Community Center/ Kearney Lake Masjid

Name of the Child:		/ Age/ Grade://
Street Number and Name	p:	Apt. #:
City:	Postal Code:	Province:
Phone:	Email:	
Health Card #:		
Allergies (if any):		
Activity:		
in charge of the Nova Scothat there are certain risk other risks inherent in the By signing this parental cof withstanding both the registered. I also express are known or unknown to In recognition of these risparticipate in and benefit of whatever kind or nature participation in the activity KLM from liability or any injury, illness, death, and my child's participation in	tia Islamic Community Center (NSICC is associated with certain Masjid Activities of which I may not be present and liability form, I expressly with physical and mental demands associatly assume all risks to my child's partitioned at this time.  Sks and realities, and in consideration from Masjid Activities. I release, waive at NSICC/ KLM. I understand and ack claim that I may have against NSICC or loss/ damage of property, court counter the NSICC/ KLM activity.	warrant that my child named above is capable stated with the NSICC activity for which he is ticipation in these NSICC, whether such risks on of my child being offered the opportunity to and disclaim all liability, claims, and demands or may here after arising in relation to my child knowledge that this release discharges NSICC/C/KLM with respect to bodily injury, personal losts, attorneys' fees and interest as a result of
authorize my child name		e undersigned, certify that I am the parent or ad the consent carefully and agree. I hereby the Masjid Activities, including any off Masjid
Cianatura		Date:
Signature		
Are yo	u accompanying with your child(ren)?	Yes No