

Blue Skies Adult Music Camp 2023 Registration Form

Clarendon, Ontario, July 30th - Aug. 2, 2023

Name _____

Address _____

Phone _____ E-mail _____

Emergency Contact Name and Phone # _____

I would like to participate in the following: (please pick one)

- 'Let's Sing!' with NicolaOddy
- 'Bluegrass' with Joey Wright
- 'Singing Around the Campfire' with Magoo and Jake

What instrument(s) will you be playing? (N/A for 'Let's Sing!') _____ Will you be day-tripping or camping onsite? _____

Do you have any allergies, medical needs, or accessibility issues that we should be aware of? Y/N

If yes, please describe: _____

(If yes, we may wish to consult with you in advance.)

Payment: The fee for this event is \$200.00. Payment methods:

- Option1: (preferred) e-transfer to martinhonig@icloud.com
- Option2 Include a cheque or money order made out to "Blue Skies in the Community".

Please mail (or PDF and e-mail) the completed form (all 3 pages including the waiver, and your payment unless you choose to pay by e-transfer) to: Blue Skies in the Community, c/o Martin Honig, 3210 County Road #3, Lansdowne, ON, K0E1L0

Refund policy: If we cancel this event, or if you cancel before July 1, 2023, a full refund will apply. The fee is non-refundable after July 1, unless there is a waiting list and we can fill your spot.

Hazards, Risks, Fine Print and Waiver:

Please read, print, and complete the following Waiver, and include it with your registration:

WAIVER AND ASSUMPTION OF RISK

PLEASE PRINT, READ, SIGN, AND INCLUDE WITH YOUR REGISTRATION

I, the undersigned, understand that in order for Blue Skies Adult Music Camp/Blue Skies in the Community to accept my application to participate in the 2023 Blue Skies Adult Music Camp, I must be over 18 years of age and I must agree to be bound by this Waiver.

ELEMENTS OF RISK:

The Blue Skies Site is remote, rugged and not professionally maintained. Attendance at the Blue Skies Adult Music Camp requires assuming a variety of risks, including but not limited to:

- (I) UNEVEN TERRAIN**
- (II) INCLEMENT WEATHER, SUCH AS RAIN, WIND, OR ELECTRICAL STORMS**
- (III) WILDLIFE, SUCH AS BEARS, SKUNKS, OR BITING INSECTS**
- (IV) NOXIOUS WEEDS, SUCH AS POISON IVY**
- (V) FALLING TREES OR TREE BRANCHES**
- (VI) NATURALLY OCCURRING ALLERGENS**
- (VII) LACK OF NEARBY MEDICAL FACILITIES**
- (VIII) EXPOSURE TO THE COVID-19 VIRUS**

ASSUMPTION OF RISK:

I understand that by attending the Blue Skies Adult Music Camp, I assume all responsibility for any accident or injury that may occur to me on the site, including exposure to the COVID- 19 virus.

WAIVER:

I waive any and all claims that may arise from my participation and attendance at the Blue Skies Adult Music Camp. I hereby release from all liability and agree not to sue Blue Skies Cultural Centre, Blue Skies Adult Music Camp, Blue Skies in the Community, or their directors, instructors, leaders, volunteers, agents or representatives for any personal or bodily injury, death, property damages, expenses or loss sustained by me as a result of my participation in the above activities (and activities noted in workshop descriptions), due to any cause whatsoever, including, without limitation, negligence or breach of statutory duty.

I acknowledge that this document may prevent me from recovering any damages for losses incurred by me at the Blue Skies Adult Music Camp. I have considered this possibility and agree to accept full responsibility for any such losses.

MEDIA RELEASE:

I am aware that I may appear in photographs or video, taken by camp staff or local media. I hereby grant permission for any such photographs or video of me to appear in a variety of media sources on behalf of Blue Skies Adult Music Camp/Blue Skies in the Community/Blue Skies Cultural Centre. (Blue Skies Adult Music Camp will not divulge your name without obtaining your prior, written permission.)

ACKNOWLEDGEMENTS:

I acknowledge and confirm that I have read and understood this entire document prior to signing below. I affirm that I am over 18 years of age.

Signature: _____

Name (please print): _____

Date: _____

Signature of Witness: _____

Name of Witness (please print): _____

Date: _____