

The Hive Climbing and Fitness – Youth (Age 17 & Under) Participant AOR Form

ACKNOWLEDGEMENT OF RISK AND RESPONSIBILITY AND INFORMED CONSENT

INFORMED CONSENT OF PARENT OR LEGAL GUARDIAN ACKNOWLEDGEMENT OF RISK AND RESPONSIBILITY FORM FOR CHILDREN UNDER THE AGE OF 18

WARNING: PLEASE READ CAREFULLY BEFORE SIGNING!

NAME OF MINOR PARTICIPANT (please print)

BIRTHDATE OF MINOR (dd/mm/yy)

NAME OF PARENT/ LEGAL GUARDIAN

EMAIL ADDRESS OF PARENT / LEGAL GUARDIAN

RELATIONSHIP TO MINOR

PHONE NUMBER FOR EMERGENCY

☐ Check to receive discounts, promotions by e-mail

I, _____ (Parent or Legal Guardian), on behalf of the Minor Participant acknowledge the following:

- I am aware that the Minor Participant named above (the “**Minor**”) will be participating in physical fitness activities solely at my own discretion and the discretion of the Minor. Those activities could include all activities, events, or services provided, arranged, organized, conducted, sponsored, or authorized by Honeycomb Climbing Incorporated, 10043104 Manitoba LTD, and Hive Climbing Winnipeg (collectively, the “**Companies**”), including without limitation: indoor climbing, outdoor rock climbing, indoor bouldering, outdoor bouldering, training, stretching, yoga, observing others engaged in these activities, school and instructional sessions, transportation to outdoor climbing sites, and all other activities, events, and services in any way connected with or related to those activities (collectively, the “**Climbing Activities**”).
- I UNDERSTAND THAT PARTICIPATION IN THE CLIMBING ACTIVITIES CAN BE HAZARDOUS AND MAY INVOLVE THE RISK OF PHYSICAL INJURY OR DEATH. I acknowledge that participation in the Climbing Activities entails known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to me or the Minor, to my or the Minor’s personal property, or to third parties. I understand that those risks cannot be eliminated without jeopardizing the essential qualities of the Climbing Activities. The risks include but are not limited to: scrapes, cuts and bruises; falling off of equipment; muscle and joint sprains and strains; broken wrists, ankles, legs, and other bones; participants falling and falling on each other resulting in broken bones and other serious injuries including death, and in the context of outdoor rock climbing, in addition to the injuries listed above, include but are not limited to: trips arising from walking on uneven terrain, falling whether roped or un-roped off a route, falling rocks or other objects, rope burns, weather which may cause injury due to extreme heat, cold or lightning, wild animals, insect bites, hazardous plant life, and transport by public or private vehicles to and from the activity site.
- I am not aware of the Minor having any existing health, mental, or physical conditions that may increase his or her risk in participating in the Climbing Activities.
- I UNDERSTAND PARTICIPATING IN THE CLIMBING ACTIVITIES COULD RESULT IN THE MINOR’S INFECTION WITH THE COVID-19 VIRUS, WHICH COULD INVOLVE FLU-LIKE SYMPTOMS, RESPIRATORY PROBLEMS, ORGAN FAILURE, PERMANENT DISABILITY, OR DEATH. I agree that I will not permit the Minor to participate in any of the Climbing Activities, if: (1) to the best of my knowledge and awareness, the Minor is experiencing, or has experienced in the prior 14 days, flu-like symptoms or symptoms of any transmissible viral or bacterial infection or disease; or (2) to the best of my knowledge and awareness, the Minor has been in contact in the prior 14 days with any person diagnosed with the COVID-19 virus. I will not permit the Minor to participate in any Climbing Activities if I have been advised by the Minor, the Province of Manitoba, any government agency, or the Minor’s doctor to physically isolate due to possible exposure to COVID-19.
- The Minor has been informed that he or she must follow the rules and instructions communicated by the Companies and its staff.
- I understand that if the Minor does not follow the Companies’ rules and instruction, he or she might lose their privilege to participate in the Climbing Activities.
- In permitting the Minor to participate in the Climbing Activities, I am not relying on any oral, written or visual representations or statements made by the Companies or their directors, officers, employees, guides/instructors, agents, or representatives or any other inducement.
- Based upon my understandings and acknowledgements described herein, I give the Minor permission to participate in the Climbing Activities.

Signature of Parent or Legal Guardian

Date (dd/mm/yy)