



**Footprints for Learning Academy**  
 102-2926 Kingsview Blvd  
 Airdrie, Alberta T4A 0C9  
 Phone: 587-775-9303

**Athletic Program Consent & Liability Forms**

**School Year:** \_\_\_\_\_

For the student(s) listed below to participation in the following sports this school year, should they sign up (initial each one):

|                          |                   |  |  |
|--------------------------|-------------------|--|--|
| <b>Cross Country</b>     | <b>Volleyball</b> |  |  |
| <b>Curling</b>           | <b>Golf</b>       |  |  |
| <b>Badminton</b>         | <b>Football</b>   |  |  |
| <b>Track &amp; Field</b> |                   |  |  |
| <b>Soccer</b>            |                   |  |  |
| <b>Basketball</b>        |                   |  |  |

**Student(s):** \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

For each of the above indicated extra-curricular athletic programs, on this \_\_\_\_\_ (mm/dd/yyyy), as parents/guardians of the abovenamed student(s) and as the student(s), we acknowledge, understand, and agree to the following attached waivers and policies namely the

- Insurance and Photography Consent
- ASSA, South Central Zone and CAAA Agreement
- FFLA's Concussion Management Protocol for All Sports
- Student Extra-Curricular Sports Activity Release and Waiver of Liability Agreement
- Parent Code of Conduct
- Student Code of Conduct

We also agree to pay all applicable athletic program fees for each student prior to each sporting activities commencement. Fees can be paid by cash or e transfer to [finance@footprintsforlearning.com](mailto:finance@footprintsforlearning.com) . Please specify what sport and student the payment is for when sending an e-transfer.

| <b>Signature of each Student Participant</b> | <b>Signature of Parent /Legal Guardian of Participant</b> | <b>Signature of Parent /Legal Guardian of Participant</b> |
|--|---|---|
|  |   |   |
|  |   |   |
|  |   |   |
|  |   |   |
|  |   |   |

*\*If parents are separated or a custody agreement is in place both parents must sign.*

## **Insurance and Photography Consent**

As a member of a school team, there is an expectation that students will on occasion be photographed, interviewed, videotaped or profiled in some manner by the media. Media representatives often want a copy of a team roster or program which generally includes the student's name, jersey number and position so that they have some indication that information they quote is accurate. We require your consent to disclose this information to the media and other outside organizations for the purposes stated above.

We also require your consent to disclose personal information to the Alberta Schools Athletic Association (ASAA), Calgary Alternative Athletic Association (CAAA) or ASAA's South Central Zone. The ASAA is an organization of Alberta Schools affiliated for the purpose of providing leadership in the promotion of school sports. They require schools to disclose student names, date of birth, and grade to determine eligibility requirements for zone and provincial competitions. They, in turn, will disclose this information to various coaches and organizers of zone and provincial competitions. Failure to obtain consent to this section would result in your child being unable to participate in any zone or provincial competition.

We also wish to notify you that in the event that your child is participating in a Board sponsored athletic program, that his or her name, address, phone number, date of birth, age, gender and parent/guardian name may be disclosed, upon your consent, to our insurers.

**As parent/guardian of the above names student(s) you hereby give consent to authorized school representatives to the disclosing of team rosters or programs to media representatives and other outside organizations for the purposes of interviewing, photographing, videotaping and otherwise profiling your child (ren).**

**As parent/guardian of the above names student(s) you hereby authorized school representatives to disclose the name of your child(ren) together with date of birth, and grade to the ASAA or CAAA to facilitate participation in the competitive sports program offered by ASAA or CAAA.**

## **ASSA, South Central Zone and CAAA Agreement**

WHEREAS the Alberta Schools' Athletic Association ("ASAA") is a voluntary, non-profit organization that has been established to coordinate a program of worthwhile athletic activities for the young people of Alberta in an educational setting;

AND WHEREAS **Footprints for Learning Society** is one of more than 370 member high schools which together ultimately determine the policy of the ASAA through representation on the Board of Governors of the ASAA;

AND WHEREAS **Footprints for Learning Society** is also a member of the South Central Zone ("SCZ") which also has Bylaws, Rules and Policies which govern the participation of **Footprints for Learning Society** in athletic activities

AND WHEREAS **Footprints for Learning Society** is also a member of the Calgary Alternative Athletic Association ("CAAA") which also has Bylaws, Rules and Policies which govern the participation of in athletic activities

AND WHEREAS it is not in the best interests of any of the student athletes who are served by the work of the ASAA, CAAA and SCZ for them to spend resources responding to court applications brought by individual student athletes, their parents or guardians;

Your, [Student and guardian], acknowledge and agree as follows:

1. You have had an opportunity to review the Bylaws and Polices of the ASAA, SCZ and CAAA which are available for our review at:
  - <http://www.asaa.ca>
  - <http://southcentralzone.com/>
  - <http://www.caaacalgary.com/>
2. You will accept the outcome of any appeal process available through the ASAA, SCZ or CAAA regarding any matter concerning you or any other athlete registered as a student at **Footprints for Learning Society** as final and binding on us.
3. You acknowledge that any application for a review of an outcome of an appeal process of the ASAA, SCZ or CAAA by a Judge in a court of law must be brought by the administration of **Footprints for Learning Society** and not by you.
4. **Footprints for Learning Society's** Membership in the ASAA, SCZ and CAAA is a privilege and not a right.
5. You, authorize **Footprints for Learning Society** to provide a copy of this document to the ASAA, SCZ and CAAA to use or publish in any manner they see fit.

## FFLA's Concussion Management Protocol for All Sports

**Definition** – a concussion is a brain injury which results in a temporary disruption of normal brain function. A concussion occurs when the brain is rocked back and forth or twisted inside the skull as a result of a blow to the head or body.

**Signs and Symptoms** – Concussions signs and symptoms include, but are not limited to: headache, appears to be dazed or stunned, ringing in the ears, fatigue, slurred speech, nausea or vomiting, dizziness, loss of balance, blurry vision, sensitive to light or noise, memory loss or confusion.

**Treatment of Concussion** – The athlete, suspected to have sustained a concussion, will be immediately removed from practice or competition. The basic treatment for a concussion is cognitive rest. The student should avoid/limit watching television, reading, playing video games, sending texts, using a computer, and bright lights.

**Return to Play** – After suffering a concussion, the athlete is NOT to return to play or practice on that same day. In most cases the athlete will progress one step each day. Once the athlete is asymptomatic of a concussion, and is cleared to return to activity by a **medical professional**, the athlete may proceed as follows, with the following 5 steps:

**Step 1:** Light aerobic activity e.g. walking, exercise bike or light jog; no weights.

**Step 2:** Moderate aerobic exercise in gym or on field; no helmet or other equipment

**Step 3:** Non-contact drills in full uniform. May begin weight training

**Step 4:** Full contact practice or full speed training

**Step 5:** Full game play

\* In most cases the athlete will progress one step each day.

\* If concussion symptoms re-occur, during any phase of the return to play program, the athlete must discontinue all activity and be re-evaluated by a health care professional.

You have read and agree to follow the concussion management protocol.

## Student Extra-Curricular Sports Activity Release and Waiver of Liability Agreement

|                 |  |
|-----------------|--|
| <b>WARNING:</b> | <b>By signing this agreement, you give up your right to bring court action to recover compensation for yourself or your child for any injury to your child or his/her property or for the death arising out of your child's participation in the sports activity identified in this agreement.</b> |
|-----------------|--|

### PRELIMINARY UNDERSTANDING

1. You the undersigned acknowledge and agree that while the above-named Student is participating in the Sports Activity noted above at or under the auspices of Footprints for Learning Academy that:
  - a) You are aware that the Sports Activity has inherent risks and hazards, which you are voluntarily assuming, and
  - b) You have full knowledge of the nature and extent of the risks associated with the Sports Activities such as serious injuries.
2. Despite the above-mentioned risk and hazards, you freely and voluntarily assume such risks and hazards inherent in the Sports Activity.

### RELEASE AND WAIVER OF LIABILITY

1. In consideration of the participation of the Student in the Sports Activity at any time whatsoever at or under auspices of Footprints for Learning Academy, whether that occurs during school hours, after school hours, or at any other time, you, the parent(s)/legal guardian(s) of the Student(s) agree to release, indemnify and save harmless the Board of Footprints for Learning Society, its employees, agents, insurers and volunteers (referred to as the "named persons") and each of them against and from all actions, damages, claims and demands which may be brought against the above named persons by or on behalf of the Student in respect of or arising out of any accidents which may result in injury or death of the Student or damage to or loss of property belonging to the student.
2. You acknowledge that you have read and understand all of the contents of this Agreement, having taken note of specifically the warning stated above, and intend to be legally bound to the contents of this Agreement in so signing.

## **Parent Code of Conduct**

As a spectator at a school function, you realize that you are under the school's jurisdiction. Your actions reflect upon the school you represent and you recognize your responsibility to exemplify the highest standards of conduct.

You will:

1. Demonstrate courtesy and good sportsmanship by positive cheers of encouragement for your child(ren)'s team and not against the opposing team.
2. Support referees and coaches by trusting their judgment and integrity.
  - Let coaches run the game.
  - Accept officials' decisions as final.
  - Respect the efforts of score keepers and other minor officials.
3. Not use artificial noisemakers, including but not limited to air horns, cow bells, plastic tube horns, garbage can lids, etc.
4. Not embarrass you child(ren) by yelling at them, players, coaches, spectators or officials.
  - Negatively singling out any of these individuals by name, number or role.

As a guest in the school you also understand that you must abide by all the rules of that school, the policies and procedures of Footprints for Learning Academy and the Alberta School Act.

You understand that non-compliance with the above Code of Conduct may result in your removal/ban from all FFLA events.

## **Student Code of Conduct**

Footprints for Learning Academy Division strives to promote respectful behaviour in all extra-curricular sports activities by student athletes, spectators, coaches, parents and officials. This form must be signed by both the parent and student prior to the student participating in any Footprints for Learning Academy sport.

As a participating student athlete of the Footprints for Learning Academy's extra-curricular sports program, you agree to abide by the following Code of Conduct.

You will:

1. Offer constructive support of all participants.
2. Show appreciation of good plays by both teams.
3. As a host school, welcome visitors and guests, offering all possible assistance.
4. As a visitor, respect the property and regulations of the host school.
5. Recognize the integrity of the officials, realizing and respecting the difficulty of their decisions.
6. Accept the officials' decisions as final.
7. Respect the feelings of all participants and show empathy for an injured or disqualified player.
8. Learn and respect the rules of the sport.
9. Accept victory or defeat graciously, respecting the efforts made by all.
10. Express thanks to those responsible for the opportunity to enjoy a school sports activity.
11. Demonstrate respect toward all student athletes, spectators, coaches, parents and officials at all times, including when using social media.

You understand that if you do not comply in any way with the above Code of Conduct, sanctions may be applied which could include removal from your school team and subsequent disciplinary actions at the school level.

## Volunteer Driver Application

If you (parent or guardian) are able to be a volunteer drive, please complete this section. If not, you may leave blank.

### **Freedom of Information and Protection of Privacy (FOIPP)**

*Personal information is collected under the authority of the Alberta Freedom of Information and Protection of Privacy (FOIPP) Act and the School Act.*

*The personal information collected on this form will be used and disclosed for the following purposes:*

- 1. To establish that drivers meet the criteria to carry passengers for FFLA-sponsored activities and programs.*
- 2. To ensure there is a current record of insurance on file in the event of an accident or incident resulting in a claim.*

*This information will be treated in accordance with the privacy protection provisions of the FOIPP Act. Your signature above specifically authorizes FFLA to disclose the information herein as set out in the mandatory requirements section at the beginning of this document.*

This form must be completed by any person who will be driving a vehicle used to transport a person(s) to Footprints for Learning Academy sponsored events. The driver must agree to Sections I & V and one of Sections II, III, IV in order to be able drive for the purpose noted above.

**Name of Driver** (please print): \_\_\_\_\_

**Age of Driver** (must be 18 years or older): \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Name of School:** \_\_\_\_\_

**Check One:**  Student  FFLA Employee  Volunteer

Please **read and initial the following Sections** to indicate that your understanding that the Sections that apply to you. Your initials will indicate that you agree with the contents of this form and that FFLA, and the persons you transport, may rely on the accuracy of the statements made for all purposes.

This form will further confirm that you consent to the disclosure of this form and the information contained herein, notwithstanding any law that might otherwise limit or prohibit the disclosure if, in the opinion of FFLA, disclosure is in the best interests of FFLA, its insurers, or any person being transported.

### **1. DRIVING RECORD**

I have a valid Alberta Operator's Licence, detailed below, for the vehicle that I will drive. My Alberta Operator's Licence has not been under prohibition or suspension in the last three years. **(Note: If you have been prohibited or suspended from driving in the last three years, you cannot transport persons to events sponsored by FFLA).**

\_\_\_\_\_

**Initials**



Alberta Operator's Licence #: \_\_\_\_\_ Class: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

When driving a vehicle, you must have the appropriate class of license: Class 2

- Class 3, 4, 5 and any bus
- Class 4 - Ambulance, taxi and small bus (including 12-passenger vans) Class 5
- Two-axle motor vehicle and recreation vehicles

I have no more than four (4) demerits against my Alberta Operator's License.  
(If you have 5 or more demerits, you cannot transport persons to events sponsored by FFLA).

\_\_\_\_\_

**Initials**

**2. IF DRIVING A PERSONAL VEHICLE**

Check one: Applicable  Not Applicable

I have confirmed and solemnly declare that the vehicle is insured under a valid and current policy of insurance for \$1,000,000 third party liability and have outlined the insurance information below which I certify to be accurate. In the event of a bodily injury or property damage claim, the vehicle owner's automotive insurance policy is considered primary insurance. Damage to the owner's vehicle is NOT insured by FFLA.

**(Note: You may not transport persons to events sponsored by FFLA if the limit of insurance on the vehicle is less than \$1,000,000).**

\_\_\_\_\_

**Initials**

|  |  |
|--|--|
| <b>Vehicle Owner</b> (if different than driver):           |  |
| <b>Vehicle Owner's Insurance Company:</b>                  |  |
| <b>Insurance Broker:</b>                                   |  |
| <b>Policy #:</b>   |  |
| <b>Liability Limit</b> (minimum requirement - \$1,000,000) |  |

**3. IF DRIVING A RENTAL VEHICLE**

Check one: Applicable  Not Applicable

I will register with the automobile rental agency as an additional/authorized driver for the rental agency's purposes. I will also ensure that FFLA is listed as the renter of the automobile.

\_\_\_\_\_

**Initials**

**4. IF DRIVING A FFLA-OWNED OR LEASED VEHICLE PLEASE INDICATE:**

**5. OTHER TERMS AND CONDITIONS:**

- 5.1 I will follow all conditions/endorsements that are noted on my Alberta Operator's Licence.
- 5.2 I agree to operate the vehicle in a safe manner and to abide by the laws within the jurisdiction(s) in which I am driving.
- 5.3 I agree to limit the number of passengers to the number of useable seatbelts and will not allow passengers to ride in the back (box) of a truck. All passengers must wear seatbelts while the vehicle is in motion.
- 5.4 I understand and agree that, in case of a claim, the vehicle owner's automobile liability is the primary insurance coverage.
- 5.5 I agree to immediately inform the school principal if any of the information provided on this form changes.
- 5.6 I agree to report to the school principal any accident that occurs while driving a FFLA- owned vehicle, a FFLA rental, or personal vehicle in connection with an activity sanctioned by Footprints for Learning Academy.
- 5.7 I agree not to use my cell phone while the vehicle is in motion.

I certify that the information contained in this agreement is accurate. I have read, understand and agree to the Terms and Conditions listed above for being authorized to transport persons to events sponsored by FFLA. I will give FFLA a copy of my driving record (abstract) and a copy of my insurance policy details if I am driving my personal vehicle for a FFLA-sponsored activity.

|  |
|--|
| <p><b>Signature of Driver:</b> _____ <b>Date:</b> _____</p> <p><i>Completed form to be kept on file at the school for a period of two years)</i></p> |
|--|