



Youth Legal Information Form - CANADA

Appointment of Temporary Guardian for Travel and Medical Care, Release and Consents (YLIF-CAN)

FOR INTERNAL CANADIAN TRAVEL ONLY

for International Travel use CISV International's YLIF or TWAL

230 Wineva Ave
Toronto, ON, M4E 2T4
Phone 1-416-699-905

This form relates to youth participants (**under the age of 19** at the time of departure for the CISV programme) and is to be completed by a parent or legal guardian of the participant. The signed original plus one copy should be given to the Adult Leader (if applicable), who must carry them to (or during) the CISV programme. A copy should also be left with the participant's home CISV Chapter. *Note. In this form, unless otherwise specified, "CISV" includes CISV Canada, including all local and promotional Chapters, together with all leaders, staff, volunteers, employees, agents, and members.*

Signing this form is a condition of participation in the CISV Programme noted below.

Full Name of Participant		Participant's Date of Birth (day / month / year)	
CISV Programme (e.g. ICAN 2011-1)		Host Chapter (Or CISV Canada)	
Full Name of Adult Leader (if applicable)		Leader's Date of Birth (day / month / year)	
Full Name of Participant's Parent or Legal Guardian			
Emergency Contact information that CISV can use during the Programme			
Name			
Number & Street			
City		Province & Postal Code	
		Country Code	Area Code
Home Telephone		Local Number	
Cell Number			
Cell Number 2			
Email Address(es)			
Alternate Emergency contact name & phone number			

Part 1: Authorization – check all that apply

Youth may be traveling alone in certain circumstances: if they are of appropriate age or if they are travelling to meet their delegation/leader, based in another Canadian city.

_____ A) For Participant to travel with an Adult Leader

I give permission for my child to travel to and from the CISV Programme with the Adult Leader named above.

_____ B) For Participant to travel alone

I give permission for my child to travel alone to and from the CISV Programme.

Part 2: Appointment of Temporary Guardian of Participant

I hereby appoint the Adult Leader named above (if applicable) as a Temporary Guardian of the Participant named above for the purposes of consenting to medical treatment and providing prescribed medication. If the Adult Leader is not available or not required, and prompt medical attention is needed, I also appoint CISV personnel (Programme Staff or Host Family) to consent to medical treatment on behalf of the Participant. This Appointment is valid for the period stated below (please add 2 days to beginning and end of programme to allow for travel delays).

From (day/month/year)	To (day/month/year)
-----------------------	---------------------

Part 3: Health Form

I understand that I must provide a properly completed CISV Health Form in order for the Participant to attend the CISV Programme named above.

Part 4: Medical Insurance & Financial Responsibility for Medical Treatment

I understand that the Participant must have medical insurance in order to participate in this CISV Programme. Proof of medical insurance must be provided below or attached to this form. If the insurance is not accepted or does not pay, I accept financial responsibility for the necessary medical expenses of the Participant.

Part 5: Proof of Medical Insurance

Participants are required to have additional medical/travel insurance on top of provincial health insurance if the programme involves travel outside of the home province. Please provide details and attach a copy of the additional insurance.

Name of Province and Health Card Number	
Name of Private Insurance Company	
Policy Number	

Part 6: Legal Release & Responsibility to Pay for Damage *(see Note of Explanation at the end of this form)*

I understand the nature of the CISV Programme noted above and consider my child to be capable of taking part in it.

I agree not to make a claim or file a lawsuit against CISV if my child is injured while travelling to, from, or participating in the above Programme, unless there has been gross negligence on the part of CISV.

My child and I understand that CISV participants are expected to conduct themselves in accordance with local laws and CISV rules. If my child engages in inappropriate behaviour he / she may be sent home before the end of the Programme at CISV’s discretion. I will cover the costs of such trip.

I also agree to pay for any damage or injury caused by my child.

Part 7: Membership

I understand that as part of participation in the above Programme, the Participant is an Individual Activity Member in CISV Canada. I agree that CISV will keep a record of the Participant’s name and contact details, will use this information for internal administration of membership and participation and may contact the Participant in the future with information about the organization.

Part 8: Permission to Use of Images and Art or Written Work

I agree that CISV may use and publish photographs, artwork, and written work as well as video and audiotape created as part of participation in the CISV Programme. CISV may use these items in the production of educational or promotional materials including web pages. These items may be used and published with the participant’s first name (or nickname), age and nationality. Unless my specific parental consent is obtained, participants will not be identified by full name.

Part 9: Permission to Swim

I give my child permission to participate in swimming and other water activities. My child’s swimming ability

Swimming Ability (tick one)	None		Some		Good Swimmer	
-----------------------------	------	--	------	--	--------------	--

Part 10: Research on CISV Programmes

In addition to its educational programmes, CISV works to promote research in the field of intercultural education and relations. I give permission for my child to participate in approved research projects. Unless my specific parental consent is obtained, children will not be identified by full name. For further information, please see CISV International’s Amended Research Guidelines (Info-File R-04) available at <http://resources.cisv.org>.

Part 11: Signatures

BEFORE you sign this document, you need to locate a Notary Public or Lawyer who can witness your signature.

As proof of:

- permitting my child to travel with the named Adult Leader as noted in Part 1-A above, or, alone as in Part 1-B;
- appointing the Adult Leader and / or others as Temporary Guardian as noted in Part 2 above;
- understanding the requirement of a properly completed Health Form as noted in Part 3 above;
- accepting the insurance requirement and financial responsibility as noted in Part 4 above;
- the insurance information provided in Part 5 above;
- accepting my obligations and the release and conditions / terms noted in Part 6 above;
- All other permissions noted in Parts 7 through 10 above

I have signed this legal document on the date stated immediately below.

Signature of Parent or Legal Guardian		
		(Day / Month / Year)
Signature of Participant		
		(Day / Month / Year)
Signature of Notary/Lawyer		
		Day / Month / Year of signature
Printed name of Notary/Lawyer		

Notary (This space is for the **required** official Seal and/or Signature of a Notary or Lawyer)

NOTE OF EXPLANATION

For over sixty years, CISV has worked to increase cross-cultural understanding among the children and youth of the world. Thousands of young people have been transformed by personal experience through CISV's multi-cultural educational programmes. Since the first Village in 1951, CISV volunteers have worked to provide safe educational opportunities for our participants to learn about the world and themselves. We are proud of our results and work hard to earn the trust of parents who allow their children to participate in CISV.

Although the health and safety of all CISV participants is of great importance to the worldwide network of volunteers that make the CISV programme possible, in recent years, the cost of property and liability insurance has increased steadily despite our risk management programme.

In order to ensure the continued operation of its programmes, CISV Canada requires a liability release as a condition of participation. For this reason, in order to participate as a CISV delegate, a parent or legal guardian of all youth participants under the age of 19 must sign a Legal Release & Responsibility to Pay for Damage (contained in this form).

Although CISV will work to maintain liability insurance for the benefit of non-participants, including schools and other institutions that provide facilities for our programmes, we believe that this release, together with our on-going risk management efforts, will limit the impact of rising insurance premiums on our ability to offer the CISV programmes in countries around the world.

CISV Canada requires all participants to carry their own medical insurance for out of province travel.
If you have any questions about the Release, please discuss them with a CISV representative before signing.