



Acknowledgment and Consent Form

My child is authorized to fully participate in a canoe trip into the wilderness areas of the Boundary Waters Canoe Area Wilderness in NE Minnesota and/or the Quetico Provincial Park in Ontario, Canada which is being organized and sponsored by:

(Name of Youth Group or Organization)

At all times during this trip, the adult leaders of this organization are fully authorized to make such decisions as they deem necessary concerning immediate medical care of my child. I give my full parental and/or legal guardian consent to the leaders to make such decisions concerning the health of my child. The following are the limitations upon immediate health care decisions which I deem appropriate, if any:

The following are medications which my child is allergic to and should NOT receive, if any:

I have been made aware that there are particular risks and hazards that are inherent in wilderness travel. At organizational meetings, this topic has been discussed. Written material has been provided to me or been made available for me to read, including a statement entitled "Wilderness Travel Risks" prepared by Canadian Border Outfitters.

During the trip, the leaders of the organization will be making decisions that influence the safety of my child. As the outfitter is unable to judge the physical and mental capacity of my child to participate in this trip, I have made the leaders of the above organization aware of any known limitations that affect my child's participation.

I recognize that traveling in the wilderness areas during this trip will expose my child to risks of canoeing in rivers and on lakes, and to remote tent camping situations. I have discussed with my child the challenges to be faced by wilderness travel as I have learned them from meetings with the trip leaders and written materials, and believe my child is mature enough to responsibly handle this trip. My child has been instructed by me to wear a personal flotation device (life jacket) at all times on the water.

Child's Name: _____

Parent's/Guardian's Name: _____

Address: _____

Phone Number: _____

Parent's/Guardian's Signature: _____ **Date:** _____