



2008 Territorial Skills Competition
PARTICIPANT REGISTRATION FORM

CLUB NAME (i.e. Carpentry):

PARTICIPANT INFORMATION Please type or print clearly

Student Name

Home Mailing Address

City Territory Postal Code Home Phone

MANDATORY:

Date of Birth: M/ D/ Y Age: Sex: male female

School/ College/ Organization

Emergency Contact Person

Phone Daytime Phone Evenings

MEDICAL INFORMATION

Provincial Health Card # Year of last tetanus shot

Do you have any existing medical conditions which would affect your ability to participate: Yes No

If yes, explain

Do you have any allergies: No Yes What?

SPECIAL NEEDS

Do you have any special needs (physical, language, etc.) that will require additional support at the club? No Yes

If yes, please describe the needs and the support required

AGREEMENT TO PARTICIPATE/ BE PHOTOGRAPHED/ WAIVER

I have read and understand the rules\* and conditions of participating and I agree to them.

Signature of Participant (Parent/Guardian)\*\* Date

\*See reverse for rules and regulations.

\*\* If you are under 18 years of age, your parent/guardian must also sign.

NOTE: There maybe a registration fee for some clubs to help with material costs. Please check with the coach.

Skills Canada Yukon
103 Platinum Road
Whitehorse, Yukon, Y1A 5M3
Tel: 867-668-2709
Fax: 867-668-2704

**SKILLS CLUB**  
**RULES AND CONDITIONS**

As a participant in the Skills Canada: Yukon Skills Clubs, I have read, understand and by signing the "Participant Form" agree to the following terms;

**LIABILITY & MEDICAL RELEASE**

I hereby agree to release the Skills Canada: Yukon Corporation, its representatives, agents, servants, volunteers, and employees from liability for any injury to the named person, resulting from any cause whatsoever occurring to the named person at any time while attending any Skills Canada: Yukon activities, including travel to and from these activities, excepting only such injury or damage resulting from willful acts of such representatives, agents, servants, and employees.

I do voluntarily authorize Skills Canada: Yukon Corp. its representatives, agents, servants, volunteers, and employees to obtain routine or emergency diagnostic procedures and/or routine of emergency medical treatment for the named person as deemed necessary in medical judgment.

I agree to indemnify and hold harmless Skills Canada: Yukon Corp. its representatives, agents, servants, volunteers, and employees. For any and all claims, demands, actions, rights of actions, and/or judgment by or on behalf of the named person arising from or on account of said procedures and/or treatment rendered in good faith and according to accepted medical standards.

**PHOTO RELEASE**

I agree that still photographs and videotapes of me taken during the course of the Skills Canada: Yukon activity may be used and reproduced by the Corporation in promotional materials and bulletins.

**CODE OF CONDUCT**

Skills Canada: Yukon Corporation wants every student representative to have an enjoyable experience with maximum attention on safety and comfort. All individuals representing Skills Canada: Yukon official business will be expected to conduct themselves in a manner best representing this student organization.

To receive maximum benefit from your participation, the "Code of Conduct" has been established by Skills Canada: Yukon and must be adhered to always.

It should be noted that your assignment is voluntary, and as such you agree to abide by the Skills Club rules and regulations or forfeit your personal rights to attend and participate. We are proud of our students, and know that by signing and returning the "Skills Canada: Yukon Liability and Medical Release Form" you agree to this "Code of Conduct" and are simply reaffirming your dedication to be the best representative of your school possible.

1. My conduct shall be exemplary at all times.
2. I will attend all activities for which I am registered and will be on time.
3. I will listen and obey instructions from my advisor and/or coach

I agree, if for any reason, I am in violation of the rules of the activity, I may be brought before the appropriate discipline committee for an analysis of the violation(s), and I further agree to accept the penalty imposed on me, with the understanding that all such actions are explained to me, and further that the severity or the penalty may increase with the severity of the violation, even to the extent of being expelled from the club immediately.

Having read and understood completely the "Code of Conduct" of Skills Canada: Yukon Corp., liability, medical release and photo release, I do agree to follow the procedures and practices described.