PARENTAL CONSENT, RELEASE OF LIABILITY & INDEMNITY

I, the undersigned, certify that I am the parent or legal guardian of (*please print name*) _____. I hereby authorize my minor child named above to attend and participate in the **Camp Go Goethe! Summer Camp 2026** (the "**Camp**") given by
the Goethe-Institut Canada Inc. (the "**Goethe-Institut Toronto**"). I understand that my minor child must obey all established rules and regulations and follow the instructions of the Goethe-Institut Toronto staff in charge of the Camp. I consent to and understand that the Goethe-Institut Toronto has the right to dismiss my child when he/she/they, in the Goethe-Institut Toronto's sole discretion poses an unreasonable disruption or is a hazard to the safety and well-being of others. I understand that if my child is sent home under such circumstances, I will be responsible for all associated costs incurred, including the cost of travel arrangements and will not be eligible for any refund of fees.

I acknowledge that my child is at all times personally responsible for his/her/their valuables and other personal articles, including cash and any cellphone or other device, while attending the Camp.

I acknowledge that students, even under close supervision, will have occasional accidents, and that falls, collisions, and other incidents may occur and cause injury or damage to property. Furthermore, I acknowledge that there are risks associated with excursions and outings, including those made by public transit, and that there may be other risks inherent in participating in the Camp of which I may not be presently aware. Accordingly, I acknowledge that participation in the Camp involves certain dangers and risks which may expose my child to hazards of personal injury or property damage and which may result in my child being unable to contact me or be unable to receive immediate medical care and assistance if injury occurs.

By signing this parental consent and liability form, I expressly warrant that my child named above is capable of withstanding both the physical and mental demands associated with participating in the Camp. I also expressly assume all risks to my child's participation in the Camp, whether such risks are known or unknown to me at this time. In recognition of these risks and realities, and in consideration of my child being offered the opportunity to participate in and benefit from the Camp, I agree on behalf of myself and my child to remise, release and forever discharge the Goethe-Institut Toronto, its officers, directors, employees, advisors, assignees, successors, and agents (collectively, the "**Releasees**"), from any and all claims, losses, costs, demands, damages, lawsuits, actions or causes of action whatsoever in respect of, or relating to, directly or indirectly, any personal injury, death, property damage or loss sustained by myself or my child, which my child and/or I and our respective heirs, executors, administrators, next-of-kin, successors or assigns may now or hereafter have against the Releasees or any part of them as a result of my child attending and participating in the Camp.

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I further agree on behalf of myself and my child to indemnify and hold harmless the Releasees, or any of them, from any and all claims, demands, expenses, costs (including legal costs), suits, debts, liabilities and causes of action for which it/they may become liable as a result of any personal injury, death, property damage or loss, including those in any way resulting from, occasioned to, or suffered by, any person or property by way of any act or omission of myself or my child in connection with my child's participation in the Camp.

Name of Parent/Legal Guardian: _____

Signature of Parent/Legal Guardian: _____

Date: _____

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MEDIA CONSENT AND RELEASE

Camp Go Goethe!

Goethe-Institut Toronto Summer Camp 2026

(the "**Camp**")

The staff at the Goethe-Institut Canada Inc. (the "**Goethe-Institut Toronto**") may take photos of Camp participants to post in the Goethe-Institut Toronto premises, on its website, or on its social media accounts. The staff may also occasionally videotape or otherwise record participants in connection with Camp activities. It is possible that the Goethe-Institut Toronto may wish to use Camp participants' photos or other recorded material for other purposes, including in presentations and brochures.

I hereby give the Goethe-Institut Toronto, its employees, agents, and servants, my permission to film, photograph, record, videotape, or audiotape my child (*please print name*) _____ while he/she/they attend the Camp. I understand and agree that any or all of the recorded material may be used in or on the Goethe-Institut Toronto website, Facebook page and other social media accounts, presentations, print publications, and online publications, including for promotional and advertising purposes, and that such use shall be without payment of fees, royalties, or other compensation. I further understand that all such recorded material, in whatever medium, shall remain the property of the Goethe-Institut Toronto.

I understand that my child may be identifiable from such recorded material even if the Goethe-Institut Toronto does not publish his/her/their name and I hereby waive, assign and release to the Goethe-Institut Toronto all rights associated with any such recorded material and release the Goethe-Institut Toronto from any liability associated with any such recorded material or the Goethe-Institut Toronto's use of any such recorded material.

Name of Parent/Legal Guardian (*please print*): _____

Signature of Parent/Legal Guardian: _____

Date: _____

I do NOT give the Goethe-Institut Toronto, its employees, agents, and servants, my permission to film, photograph, record, videotape, or audiotape my child (*please print name*) _____ while he/she/they attend the Camp.

Name of Parent/Legal Guardian (*please print*): _____

Signature of Parent/Legal Guardian: _____

Date: _____

EMERGENCY CONTACT FORM

Full Name of Child (First/Middle/Last): _____

Date of Birth (M/D/Y): _____/_____/_____ Gender: _____ Age: _____

Home Address: _____

City: _____ Province: _____

Postal Code: _____

Home Phone #:( ) _____ Alt. Phone #: ( ) _____

Health: *Please list all Medical Issues/Allergies/Activity Restrictions/Medications if applicable*

_____

_____

_____

Family Physician's Name: _____

Family Physician's Address:_____

Contact Phone #: _____

PARENT/LEGAL GUARDIAN INFORMATION:

(1) Name of Parent/Legal Guardian: _____

Address: (if differs from the Student): _____

City: _____ Province: _____

Postal Code: _____

Home Phone #: ( ) _____ Work Phone #: _____

Alt. Phone #: ( ) _____

Email Address: _____

(2) Name of Parent/Legal Guardian: _____

Address: (if differs from the child): _____

City: _____ Province: _____

Postal Code: _____

Home Phone #: ( ) _____ Work Phone #: _____

Alt. Phone #: ( ) _____

Email Address: _____

MEDICAL AUTHORIZATION

In case of an accident or emergency, we authorize the Goethe-Institut Canada Inc. (the "**Goethe-Institut Toronto**") to seek medical or surgical assistance for our child (*please print name*) _____ which may include admittance to hospital. We confirm and agree that we will promptly reimburse the Goethe-Institut Toronto for any and all costs and expenses, including transportation costs, incurred by the Goethe-Institut Toronto in connection with such assistance.

We hereby acknowledge that while the Goethe-Institut Toronto will make every effort to contact us to obtain our prior consent and approval in relation to such assistance, there may be circumstances where the Goethe-Institut Toronto is unable to obtain our prior consent and it is in our child's best interest for the Goethe-Institut Toronto to proceed with providing assistance without our prior consent. We therefore hereby authorize the Goethe-Institut Toronto to incur any necessary costs in cases where, in the Goethe-Institut Toronto's sole discretion, immediate assistance is required and our prior consent and approval cannot be obtained for any reason whatsoever, and we hereby agree to promptly reimburse the Goethe-Institut Toronto for any such costs incurred.

Name of Parent/Legal Guardian (*please print*): _____
Signature of Parent/Legal Guardian: _____
Date: _____

Name of Parent/Legal Guardian (*please print*): _____
Signature of Parent/Legal Guardian: _____
Date: _____

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