

# Art N' Smart

## Bus Consent & Liability



### ALL PARENTS/GUARDIANS MUST COMPLETE THIS FORM

This form applies to all Art N' Smart Students. Even students who do not travel to the Academy on the Art N' Smart Bus may travel on it at some time during their registration period for Excursions, or in the case of family emergency. All parents are therefore requested to complete and return this form with their Registration Package.

Student Name: \_\_\_\_\_ Program: \_\_\_\_\_

My child has permission to travel on the Art N' Smart Buses. I understand that these buses have seat belts, that appropriate safety precautions will be taken, and that academy rules and regulations will be in place while travelling on the bus. I accept that Art N' Smart or their Staff cannot be held responsible for events or accidents that are outside of their control.

In the event of injury or accident involving my child, I understand that I will be informed as soon as possible. Should my child's Primary and Secondary Contacts be out-of-contact, I authorize Art N' Smart Staff to act on my behalf and in the best interests of my child in case of a medical emergency.

I release Art N' Smart Academy and its representatives from responsibility for all costs, expenses, and damages, and from any legal liability arising from any decision made on my behalf. In this regard, I will not bring any suit or assert any claim against Art N' Smart Academy or its representatives as a result of any action taken pursuant to the authority granted below.

Parent/Guardian Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_

# Art N' Smart

## Outdoor Activity Consent



During Camp, students will often participate in walks and visits to the park or playground in the local neighbourhood I hereby authorize my child to participate in these activities.

I give permission to the staff of Art N' Smart Academy to apply sunscreen of SPF 15 or higher to my student when he or she will be engaging in outdoor activities. I understand that sunscreen may be applied to the exposed skin of my child, including but not limited to the face, top of the ears, nose, bare shoulders, arms, and legs.

Please label personal sunscreen bottles with your child's name on it.

Student Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

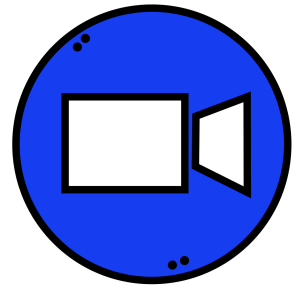
Signature: \_\_\_\_\_

Date: \_\_\_\_\_



# Art N' Smart

## Media Consent



ALL PARENTS/GUARDIANS MUST COMPLETE THIS FORM

Dear Parents and Guardians,

We ask for your permission to let us upload your child's photos or videos to share more about our Academy with our community.

Please check the correct boxes below.

- I give permission to Art N' Smart to put my child's photo or video image on the Academy's Website
- I give permission to Art N' Smart to put my child's photo or video image on the Academy's Social Media Pages
- I give permission to Art N' Smart to put my child's photo or video image on the Academy's public flyers
  
- I DO NOT give permission to Art N' Smart to use my child's image



Student Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# Art N' Smart

## Allergy Alert



Student Name: \_\_\_\_\_

ANAPHYLAXIS  EPIPEN

Allergen: \_\_\_\_\_

Symptoms: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Treatment:

\_\_\_\_\_

**STUDENT  
PHOTO HERE**

I hereby request that Art N' Smart Academy administer the above procedure to my child in the event of an allergic reaction. I acknowledge that Art N' Smart staff are not medically trained. At all times, it remains the Parent or Guardian's responsibility to ensure that clear instructions and current physicians' orders are provided to Art N' Smart staff, along with necessary medications.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## **EMERGENCY ACTION PLAN FOR ANAPHYLAXIS**

- Administer EpiPen® immediately
- DESIGNATE SOMEONE TO CALL AN AMBULANCE. This person will advise the dispatcher that a student is having an anaphylactic reaction (a severe, life-threatening reaction)
- Call Parent/Guardian
- If an ambulance has not arrived within 15 minutes and breathing difficulties are present or student has fallen unconscious, administer second EpiPen®
- The student must be taken to a hospital immediately, even if symptoms subside entirely
- Send second EpiPen® with the ambulance if it has not yet been administered