



**The Burgess Shale  
Geoscience Foundation**®

The Burgess Shale Geoscience Foundation  
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## **PARENT/GUARDIAN CONSENT & ACKNOWLEDGEMENT OF RISK FORM**

### **Please Read Carefully**

#### A. Information

**Minor's Name:** \_\_\_\_\_

My child will be given the opportunity to participate in a guided hike to the Mt. Stephen Trilobite Beds and/or the Walcott Quarry under the supervision of a hiking guide (the Guide) with the appropriate certifications from either the Interpretive Guides Association or the Association of Canadian Mountain Guides.

The Guide will make every reasonable effort to ascertain that:

- a) The minor who undertakes the hike will be adequately supervised.
- b) Any equipment made available has been inspected and is deemed to be appropriate, safe and well maintained.

Potential hazards may include, but are not limited to:

Extreme weather/hypothermia/hyperthermia  
Athletic Injuries (sprains & strains)  
Trips, falls, collisions (including cuts, head & spinal injury)  
Fall from height / impact with ground  
Lost participant  
Toxic flora  
Inhalation of smoke due to wildfires  
Asthma attack  
Falling Trees

Equipment failure  
Lightning strikes / other burns  
Allergic reactions  
Cold related injuries  
Rock Fall  
Wildlife encounter  
Altitude related illness  
Heat related illness  
Slope failure  
Pathogens

**Medical Assistance, aside from first aid, may not be readily available**

## B. Parent/Guardian Consent and Acknowledgement of Risk

- 1) I am satisfied that I have been informed of my right to obtain as much information about this activity as I feel necessary, including information beyond that information provided to me by the Burgess Shale Geoscience Foundation to the extent that I require and am not, in any way, relying solely upon information provided by the Burgess Shale Geoscience Foundation respecting the nature and extent of the risks and hazards associated with the activity.
- 2) I freely and voluntarily assume the risks and hazards inherent to the activity and understand and acknowledge that my child, as a participant, may suffer personal and potentially serious injury or death due to an accidental event.
- 3) My child has been informed that he/she is to abide by the rules and regulations, including directions and instructions provided by the Guide, the Burgess Shale Geoscience Foundation, and Parks Canada imposed on minors while participating in the activity. This shall include his/her participation in the pre-hike safety briefing.
- 4) In the event that my child fails to abide by the rules and regulations imposed on the participants while participating in the activity, disciplinary action may require that he/she not participate in the activity.
- 5) I acknowledge that it is my responsibility to advise the Burgess Shale Geoscience Foundation of any medical or health concerns of my child which may affect his/her participation in the activity.
- 6) I understand that there is no provision for accidental death, dismemberment, disability or medical expense insurance on behalf of my child or other participants in this activity.
- 7) I consent that the Guide may secure such medical advice and services as that individual, in his/her sole discretion, may deem necessary for my child's health and safety, and that I shall be financially responsible for such advice and services.
- 8) Based on my understanding, acknowledgement and consents as described herein, I agree

that \_\_\_\_\_ (name of minor) has my permission to participate in this activity under the supervision of the Guide.

Name: \_\_\_\_\_  
Parent/Guardian (Please Print)

Signature: \_\_\_\_\_  
Parent/Guardian

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

Name: \_\_\_\_\_  
Minor (Please Print)

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