



Name of Youth: _____

Best phone # to reach you on: _____

Age (as of July 8, 2019): _____

Referring youth worker or teacher: _____

Place of residence/address (**and postal code**) as at July 8th, 2019:

Are you a first time mountain biker? (circle one) **Y** **N**

If no, how many days' experience have you had and how long ago?

Do you own a bike with single or dual suspension? (Not required, but we would like to know if you are using your own bike for some of the trips and look at it before the program starts) **Y** **N**

Please give reasons **why you** want to participate in the 'Live to Ride' program (youth's words only please):

Can you be available Monday and Wednesday afternoons in July/August? **Y** **N**

Are there days of the week or weekends in July/August that you are unavailable?:

Please enter youth's height, weight, shoe and shirt size (for supply and rental purposes):

Please indicate the type of spot you are applying for:

Paid spot (\$450/participant - invoice will be sent once participant has been accepted into the program)

Full scholarship spot (please attach proof of eligibility, see below)

Partial scholarship (if you are not eligible for a full scholarship seat but would like to inquire about partial support, please select this option and we will follow up with you to discuss options!)

* If applying for a scholarship seat, please email proof of eligibility to programs@elevationoutdoors.ca. To see our eligibility criteria, and approved documents, please visit <http://www.elevationoutdoors.ca/programs/> (and scroll down on the web page).

Are you able to meet at a central location (Xtreme Theatre West Side, Orchard Park bus station, 7-11 Rutland) for transport to the rides?

Y N (Please circle which location)

Mail to: PO Box 20071 Towne Centre, Kelowna BC, V1W 9H2 or info@elevationoutdoors.ca

Deadline: June 28th, 2018

Dear parent or legal guardian,

Elevation Outdoors is running a program called 'Live to Ride' over the summer for disadvantaged youth in the local area. Your child has expressed interest in the program and has been considered by their youth worker or teacher to be a good candidate for participation.

The program involves teaching young people to mountain bike starting from the elementary level. It will be using various terrain within the Okanagan valley, including cross country and downhill mountain biking. The program also involves reflecting upon these experiences and using it as a metaphor for life experiences and learning. It will run for 8 weeks during summer, starting the week of **July 8th, 2019** and ending by **August 22nd, 2019**. The program is going to run on **Monday and Wednesday afternoons (and one Thursday)**. The participants will go to Big White for downhill riding twice during the program, on Monday, August 12th and Thursday August, 22nd.

This letter is to inform you of the program and the expressed interest, and also of the inherent risks in the activity of mountain biking. On my behalf, and on the behalf of any minor children participating in these activities, for whom I am legally responsible, I agree to the following: ASSUMPTION OF RISKS: I am aware and understand that MOUNTAIN BIKING activities involve many risks, dangers and hazards, including but not limited to the following: I acknowledge and accept that mountain biking involves risks, dangers and hazards in addition to those normally associated with bicycle riding and that injuries are a common and expected part of mountain biking. The Live to Ride program may take place on steep and rugged terrain and will expose the rider to many risks, dangers and hazards. The terrain may be un-inspected, uncontrolled and unsafe do to constantly changing conditions. The inherent risks, hazards and dangers include but are not limited to the following: collision with other riders, vehicles, bicycles, trees, tree stumps, tree wells or other objects; fences and other man made structures; mechanical failure of equipment; rapid an uncontrolled acceleration on hills and inclines; changing weather conditions; unsafe terrain including steep or slippery sections, cliffs, rocks, holes, or crevices; extreme variation in cycling terrain; encounters with domestic and non domestic animals; falling or being thrown off the mountain bike; negligence on the part of the releases – including the failure to protect the participant from the risk, dangers and hazards of mountain biking or to predict the whether the terrain is safe for mountain biking; negligence of other riders. I understand and acknowledge that no amount of caution, experience and instruction can eliminate all of the risks involved and I freely assume all such risks, dangers and hazards and the possibility of personal injury, death, property damage and damages or loss resulting therefrom.

I understand and acknowledge that no amount of caution, experience and instruction can eliminate all of the risks involved and I freely assume all such risks, dangers and hazards and the possibility of personal injury, death, property damage and damages or loss resulting therefrom.

Elevation is requesting that you fill out the form below stating that you have read and are aware of the inherent risks of this activity, before your child is permitted to participate in the program. We are also requesting that you fill out the attached medical form with all relevant details and BC medical numbers.

Please be assured that all appropriate safety measures and risk management practices will be exercised while the program is being delivered. Helmets are mandatory. Body

armour will also be worn on the downhill days. Participants will be supervised during all bike trips, and 'black' or most difficult runs will not be utilized unless appropriate skill has been demonstrated beforehand. It is our intention to create a lasting, learning experience for the young people involved and we will be taking their safety very seriously.

Please return all signed forms by scanned email to info@elevationoutdoors.ca or mail to **P.O. Box 20071 Towne Centre, Kelowna BC, V1Y 9H2 by June 28th, 2019.**

Sincerely,
Mike Greer
Facilitator

I have read the attached letter and understand the inherent risks in the activity of mountain biking, as well as the risks of participating in the 'Live to Ride' program. I give my child permission to participate in this program with this in mind.

Name of Participant: _____

Signature of Participant: _____

Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____

Date: _____

Video and Photographs

Elevation Outdoors has permission to use my or my child's photograph/video/audio recordings to promote the organization. I understand that the images may be used in various formats not limited to print publications, online publications, presentations, websites, and social media.

Yes No Initial _____

Parents email address : _____

Initial _____ I give permission to Elevation Outdoors to contact me about future programs and opportunities that come available.

Initial _____ I give permission for Elevation Outdoors to provide my contact information to the Canadian Tire Jumpstart Foundation. As partial funders for this program they like to be able to contact you directly with future opportunities.

Participant's Medical Form

Name: _____

BC Med Care card # _____

Date of birth (year, month, day): _____

Parent/guardian's name: _____

Address: _____

Phone # (hm) _____ (wk) _____ (cell) _____

Emergency contact name: _____ ph # _____

Medical History

(please circle yes 'Y' or no 'N' to the following questions)

1. Has your child ever suffered any form of **Asthma** ? Y N
If yes, do they take any medication for it? What type?

2. Has your child ever suffered any form of **Allergy** ? Y N
If yes, what are they allergic to and what, if any, medication is taken?

3. Does your child have any of the following conditions?

Phobias Y N

Diabetes Y N

Epilepsy Y N

Bleeding disorder Y N

Heart condition Y N

Migraines/headaches Y N

Seeing disorders Y N

Hearing disorders Y N

Ankle/knee/joint problems? Y N

Please provide details of questions for which 'yes' was answered: _____

4. Date of last Tetanus injection? _____

(if not within last 10 yrs, participant may receive a tetanus injection by a medical officer if they receive a tetanus prone wound)

Please finish on next page.

5. Is your child on any ongoing medications?

Please provide details of medications, dosage and frequency taken:

Do you give permission to your child to self-administer these medications? Y / N

6. Do you give permission for your child to be given non-prescription medications for the following conditions?

Pain/fever (e.g. Tylenol, Advil) Y N

Cold/flu tablets Y N

Bites/stings/hay fever/allergy (e.g. antihistamine) Y N

7. Is there anything about your child's situation that we need to be aware of in regards to his/her participation in this program(example: Behaviour or medical concerns)? Y N

If Yes, please explain:

8. In the case of accident or illness, I authorize the caregiver to administer first aid and/or be taken to the nearest emergency center. I consent for my child to receive medical treatment. I consent that in the event of severe illness/injury the means of transportation may be by ambulance at a cost to myself. Y N

_____ Initial

I declare that the information which I have provided on this for is complete and correct and that I will notify the program if any changes occur. I authorize the facilitator who is with my child to consent, where it is impractical to communicate with me, for my child to receive such medical or surgical treatment as may be deemed necessary.

Signed _____(parent/guardian)

Date _____

BIG WHITE MOUNTAIN BIKING

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND ASSUMPTION OF RISKS AGREEMENT (hereinafter the "Release Agreement")

**BY SIGNING THIS DOCUMENT YOU WILL WAIVE OR GIVE UP
CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE OR
CLAIM COMPENSATION FOLLOWING AN ACCIDENT.**

PLEASE READ CAREFULLY!

In this Release Agreement the term "mountain biking" includes use of all Big White mountain bike parks, trails and other facilities and all mountain bike activities including guided descents, clinics, lessons and competitions.

ASSUMPTION OF RISKS

Mountain biking takes place on steep, rugged and challenging terrain and features, and will expose the rider to many risks, dangers and hazards. Falls and collisions occur frequently. Helmets are mandatory in the Bike Park. Full face helmets and other protective gear are strongly recommended.

As with many adventure sports, riding in the Big White Bike Park involves the risk of injury, including serious injury, head injury, paralysis or death. The risk of injury increases with the degree of difficulty of the trail and the speed of descent. Although the risk of injury can never be eliminated, the rider can manage the risk through controlling speed and choosing terrain appropriate for the rider's skill and experience. Orientation sessions, lessons, clinics and coaching offered through the Big White Bike Park will also assist the rider in managing the risk of injury.

RELEASE OF LIABILITY

I agree to waive any and all claims and to release Big White Ski Resort Ltd and its affiliates, subsidiaries, officers, directors, employees, representatives and contractors (hereinafter "the Releasees") from any and all liability for any loss, damage, expense or injury, including death, that I or my next of kin may suffer as a result of mountain biking at Big White or my use of or presence in the Big White Bike Park, due to any cause whatsoever, including negligence, breach of contract or breach of any statutory or other duty of care, including any duty of care owed under the British Columbia *Occupiers Liability Act*, on the part of the Releasees. I understand that negligence includes failure on the part of the Releasees to take reasonable steps to safeguard or protect me from or warn me of the risks, dangers and hazards of mountain biking.

PLEASE SEE GUEST SERVICES FOR INFORMATION ON MOUNTAIN BIKE SAFETY

Date (DD/MM/YY)

Print Name

Rider Name

Signature

Parent Signature.

STOP - READ THIS!!!

BIG WHITE BIKE PARK

Important Information about the Bike Park

- Use of the Bike Park involves the risk of injury. You control the degree of risk you will encounter in using the trails and features in the Bike Park.
- Do not attempt any of the trails or features unless you have sufficient ability and skill to do so safely. Always ride in control and within your ability level.
- Helmets are mandatory in the Bike Park and protective padding is strongly recommended. Full suspension bikes and 24" minimum wheels are recommended.
- The Bike Park is not recommended for first time cyclists, without proper instruction.
- All inexperienced riders under age 13 should have the consent of a parent or guardian to ride in the Bike Park unaccompanied by an adult.
- Downhill riding only. Uphill riding and hiking in the Bike Park is not permitted.
- Be aware of changing conditions on trails and features. It is your responsibility to inspect trails and features before using them.
- Stay off access roads. Stop at all road crossings.

As with many adventure sports, riding in the Bike Park involves the risk of injury, including serious injury, head injury, paralysis or death. The risk of injury increases with the degree of difficulty of the trail and the speed of descent. Although the risk of injury can never be eliminated, the rider can manage the risk through controlling speed and choosing terrain appropriate for the rider's skill and experience. Orientation sessions, lessons, clinics and coaching offered through the Bike Park will also assist the rider in managing the risk of injury.

MOUNTAIN BIKERS RESPONSIBILITY CODE

1. Stay in control at all times. It is your responsibility to avoid other persons and objects around you.
2. Do not stop where you obstruct a trail or are not visible from above.
3. When entering a trail or starting downhill, you must look uphill and yield to other riders.
4. Please assist if you are involved in or witness a collision or accident and identify yourself to the Bike Patrol.
5. Keep off closed areas and obey all signs and warnings.
6. Stay on marked trails. Do not cut switchbacks.
7. Stay off lifts and out of the Bike Park if your ability is impaired through the use of drugs or alcohol.
8. You must have sufficient physical dexterity, ability and knowledge to safely ride and unload lifts. If in doubt, ask the attendant.
9. Marked hiking trails cross the Bike Park. Watch for hikers.
10. Do not feed, provoke or approach wildlife.

**KNOW THE CODE - BE SAFETY CONSCIOUS.
IT IS YOUR RESPONSIBILITY.**

PARK PRIVILEGES REVOKED FOR BREACH OF THE MBR CODE

MOUNTAIN BIKE CHECKLIST

The trails of Big White Bike Park are rough and demanding on both the bike and body. Before riding always inspect your equipment or have it checked by a qualified bike mechanic.

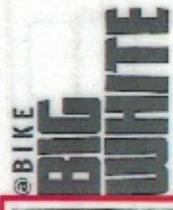
1. Ensure your helmet is in good shape and properly adjusted
2. Inspect bike frame for cracks, damaged or dented areas.
3. Ensure you have sufficient brake pad to stop your bike while descending.
4. Front and rear axles (skewers) should be tight.
5. Headset and stem must be secure with no looseness or play.
6. Check that your tires are in good condition, with no tears or cuts in the sidewall.
7. Handle bar and handle grips must be tight and unable to spin. Seat and seat post need to be fastened securely

N/A	Parent Initial
Initial - Rider	Initial - Parent or Guardian if Rider under age 19

Parent Full name printed.

Please ensure that this contract is filled out in either BLUE or BLACK Pen ONLY. Unfortunately if this is not filled in correctly, we won't be able to rent your child a bike.

Fill in the child's details who will be riding the bike in this section



NAME _____		PHONE CODE / ZIP _____	
HOME ADDRESS _____			
CITY _____	PROVINCE / STATE _____	POSTAL CODE / ZIP _____	
LOCAL BIRTH DATE _____	WEIGHT _____	HEIGHT _____	SHOE SIZE _____
AGE _____	WEIGHT _____	HEIGHT _____	SHOE SIZE _____

BIKE MODEL _____	SIZE _____	BM # _____	REAR # _____	CHEST MEASURE # _____	BIKE PWT # _____	LEGS PWT # _____	ARM PWT # _____
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PRIVACY STATEMENT

Big White respects your privacy. Any personal information we collect is used only to develop products, services and offers, communicate with our customers and complete the transactions that deliver our products and services to you. Your personal information is not shared, without your consent, with third parties. Please see our complete Privacy Policy at www.bigwhite.com

SAFETY CHECK

Bike is Clean Frame Crankset Controls Brakes Tires / Wheels Suspension Seat Post

EMERGENCY CONTACT INFORMATION: Name and telephone # _____

CONDITION OF EQUIPMENT ON RETURN	GOOD	OTHER	EXPLANATION
CONDITION OF EQUIPMENT ON RETURN	GOOD	OTHER	EXPLANATION

TECHNICIAN'S SIGNATURE

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD THE RELEASE AGREEMENT ON THE REVERSE OF THIS DOCUMENT.

DATE: _____

DAMAGE WAIVER

ACCEPTED DECLINED

Parent/Guardian initials this box that they have read and understood the back of the contract

**RELEASE OF LIABILITY, WAIVER OF CLAIMS,
ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT**
(hereinafter the "Release Agreement")

**BY SIGNING THIS RELEASE AGREEMENT YOU WILL WAIVE OR GIVE UP CERTAIN LEGAL RIGHTS,
INCLUDING THE RIGHT TO SUE OR CLAIM COMPENSATION FOLLOWING AN ACCIDENT**

PLEASE READ CAREFULLY!

Initial

TO: BIG WHITE SKI RESORT LTD. and its directors, officers, employees, instructors, guides, agents, independent contractors, subcontractors, representatives, equipment manufacturers, equipment distributors, successors and assigns, (all of whom are hereinafter collectively referred to as the "RELEASEES").

RENTAL AGREEMENT

I accept full responsibility for the equipment rented under this Agreement (the "Equipment"). I agree to pay for any damage and replace the Equipment at full retail value if not returned by the agreed date.

MOUNTAIN BIKE SAFETY

I have been advised to wear an approved helmet and other protective equipment while mountain biking. I am aware the helmets are mandatory in the Sile Park. I have been advised to carefully review the Mountain Bikers Responsibility Code, Mountain Bike Checklist and the Bike Park Rules for further safety information.

ASSUMPTION OF RISKS

I am aware that injuries are a common and expected part of mountain biking. Mountain biking takes place on steep and rugged terrain and features that are both physically and technically challenging and will expose the rider to many risks, dangers and hazards including but not limited to: mechanical failure of bicycles; improperly adjusted or maintained equipment; unexpected or unanticipated vibration or steepness in terrain, trails or features; inability to control speed and direction; loss of balance; collisions with manmade and nature objects including trees and rocks; collisions with vehicles, cyclists or other persons and NEGLIGENCE ON THE PART OF THE RELEASEES. INCLUDING FAILURE ON THE PART OF THE RELEASEES TO TAKE REASONABLE STEPS TO PROTECT OR SAFEGUARD ME FROM THE RISKS, DANGERS AND HAZARDS OF MOUNTAIN BIKING.

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

In consideration of the rental of the Equipment I hereby agree as follows:

- I AGREE TO WAIVE ANY AND ALL CLAIMS** (that I have or may in the future have against the Releasees and TO RELEASE THE RELEASEES from any and all liability for any damage, expense or injury including death that I may suffer, or that my next of kin may suffer, resulting from or arising out of any aspect of my use of the Equipment or participation in mountain biking, DUJE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE, BREACH OF CONTRACT OR BREACH OF STATUTORY DUTY OF CARE, INCLUDING ANY DUTY OWED UNDER THE OCCUPIERS LIABILITY ACT, in respect of the design, manufacture, installation, maintenance, selection or adjustment of the equipment or in respect of the provision of or failure to provide any warnings, directions or instructions as to mountain biking safety or the use of the Equipment;
- TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES** from all liability for any property damage, loss or personal injury to any third party resulting from my use of the Equipment;
- This Release Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, and representatives, in the event of my death or incapacity;**
- This Release Agreement and any rights, duties and obligations as between the parties to this Release Agreement shall be governed by and interpreted solely in accordance with the laws of the Province of British Columbia and no other jurisdiction; and**
- Any litigation involving the parties to this Release Agreement shall be brought solely within the Province of British Columbia and shall be within the exclusive jurisdiction of the Courts of the Province of British Columbia and no other jurisdiction.**

I HAVE READ AND UNDERSTAND THIS AGREEMENT AND AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND REPRESENTATIVES MAY HAVE AGAINST THE RELEASEES

Print name of User

Date

Signature of Renter (if different from user)

Print name of Renter

Signature of Technician

Parent/Guardian initials this box that they have read and understood the back of the contract

Make sure you read the contract closely. You are agreeing that mountain biking is a dangerous sport, agreeing to waive any and all claims that can be made against Big White Ski Resort and to take responsibility of the equipment that we rent to your child.

Parent/Guardian signs and prints their name in these two boxes

Print the child's name (the user) and the date which you fill in the contract in these two boxes