



OAKVILLE

EXTERNAL SUPPORT WOKER WAIVER AND RELEASE FORM
RECREATION AND CULTURE

I, _____ (PARENT/GUARDIAN), certify that
_____ (SUPPORT WORKER) has been hired by me to provide support for
_____ (PARTICIPANT NAME) while participating in a Town of Oakville
Recreation and Culture program.

The external support worker will:

- Be a minimum of 14 years of age;
- Provide the Town of Oakville with an acceptable criminal reference check (including vulnerable sector screening) prior to attending any program;
- Provide the Town of Oakville with a current Standard First Aid and CPR C certificate;
- Assume the responsibilities for the safety and supervision of the above-named participant;
- Understand that they are employed by the parent/guardian stated above and not by the Town of Oakville; and
- Work cooperatively with Town staff to ensure all inclusion goals are fulfilled. Understand and abide by all Town of Oakville program policies and procedures.

I acknowledge that the Town of Oakville shall be released and held harmless from any liability resulting from the above-named support worker and that I will indemnify the Town of Oakville with respect to any such liability.

I HAVE READ THIS WAIVER AND RELEASE FORM AND FULLY UNDERSTAND ITS TERMS AND SIGN IT FREELY AND VOLUNTARILY.

PARENT/GUARDIAN NAME	PARENT/GUARDIAN SIGNATURE	DATE
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EXTERNAL SUPPORT WORKER NAME	EXTERNAL SUPPORT WORKER SIGNATURE	DATE
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FOR ADMIN USE ONLY			
EXPIRY DATE OF STANDARD FIRST AID & CPR C		VERIFIED BY (STAFF NAME):	
ISSUE DATE OF VULNERABLE SECTOR SEARCH		VERIFIED BY (STAFF NAME):	