



Festival of the Wild Child- Scavenger Hunt WAIVER:

I certify that all registration information is true and am aware that no refunds are administered unless the event has been cancelled by the Mississippi Madawaska Land Trust due to Covid-19 concerns. I know that hiking, climbing and exploring the wilderness are potentially hazardous activities. I should not participate unless I am medically able. I assume responsibility for carrying any emergency medications I may need during the event including an EpiPen. I agree to abide by any decision of an event official relative to my ability to safely complete activities. I assume all risks associated with participating this event including, but not limited to: falls, contact with other participants, the effects of weather, including freezing and/or high heat, and the conditions of the trails, any incidents with animals and all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my participation to this event, I, for myself and anyone entitled to act on my behalf, waive and release the Mississippi Madawaska Land Trust, the directors, organizers, volunteers and, all provinces and cities, or other governmental bodies or locations in which events or segments of events are held, all sponsors, their representatives and successors, from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

I have reviewed the COVID-19 screening form (reverse side of this form) and confirm that I have not answered yes to any of the questions listed there.

I also understand that my personal information will not be shared with any other organization or individual. I hereby agree to abide by the rules and regulations set out by the Mississippi Madawaska Land Trust.

PLEASE HAVE ALL MEMEBERS OF YOUR GROUP COMPLETE AND TURN IN AT REGISTRATION:

Date: _____

Name: _____ Signature: _____

Name: _____ Signature: _____

Name: _____ Signature: _____

Name: _____ Signature: _____

Name: _____ Signature: _____

17 years of age or younger require a Parent / Guardian signature.



THIS IS A SELF-ASSESSMENT FORM FOR COVID-19 SCREENING PURPOSES

Each participant must read through it within a day of the scavenger hunt

Please Do Not Join The Festival Of The Wild Child-Scavenger Hunt If Your Answer Is “Yes” To Any Of The Following Questions.

1. Have you experienced any of the following symptoms (without known cause) in the previous 2 weeks?
 - Fever
 - New onset of cough
 - Worsening chronic cough
 - Shortness of breath
 - Difficulty breathing
 - Sore throat
 - Difficulty swallowing
 - Decrease or loss of sense of taste or smell
 - Chills
 - Headaches
 - Unexplained fatigue/malaise/muscle aches (myalgias)
 - Nausea/vomiting, diarrhea, abdominal pain
 - Pink eye (conjunctivitis)
 - Runny nose or nasal congestion without other known cause.
2. Have you tested positive for COVID-19 or had close contact with a confirmed case of COVID-19?
3. Have you been in close physical contact with any individual in the last 2 weeks who is currently sick with a new cough, fever or difficulty breathing, or diagnosed with COVID-19?
4. Are you living with anyone who has been quarantined?
5. Have you travelled in the past 14 days outside the country?

This screening form is based on recent public health advice and is provided to help protect your health and that of other participants registered for this event. Please contact admin@mmlt.ca or 613-253-2722 a.s.a.p. if you have to cancel your reservation.