

The Municipality of the
VILLAGE OF VILLAGE OF BURK'S FALLS

172 Ontario Street • PO Box 160 • Burk's Falls ON P0A 1C0
 P 705-382-3138 • F 705-382-2273 • www.burksfalls.net

Family Age 5+: 5:30pm-6:30pm & Family Age 5+: 7:00pm-8:00pm

Please return registration forms **by April 1st, 2021**. Registration forms will be accepted at the Burk's Falls Village Office. This program will run Wednesday nights for 6-weeks beginning April 7th, 2021 – May 12th, 2021. **Children 12 and under must be supervised by an adult to participate. Equipment provided.**

**Located on ice surface at the ARBF Arena
 220 Centre St. Burk's Falls**

**Cost for 6-Week program \$30.00
 ONLY ONE PARENT PER PARTICIPANT CAN ATTEND
 FACE COVERINGS ARE PROVIDED FOR ALL PARTICIPANTS**

If you wish to register for the Archery Program, please complete the application below. Please note that there is limited amount of registrations available in this program and acceptance is on a first come, first served basis for paid registration. Registration will close once the program is full, additional participants will be added to a wait list.

This program relies on community volunteers. Volunteers are needed for program instruction. Highschool students are welcome to volunteer to obtain volunteer hours.

**The Village of Burk's Falls Office (705) 382-3138
 Cash, Debit or cheque payable to: The Village of Burk's Falls**

**THE ARCHERY PROGRAM REGISTRATION IS TO BE RETURNED TO THE VILLAGE OFFICE
 One individual per application form, information collected will be shared with the volunteers.**

First Name: _____ Last Name: _____ TEL #: _____

ADDRESS: _____ AGE AS OF APRIL 7th, 2021 ____

PARENT/ GUARDIAN NAME: _____ SIGNATURE: _____

PARENT/GUARDIAN EMAIL ADDRESS: _____

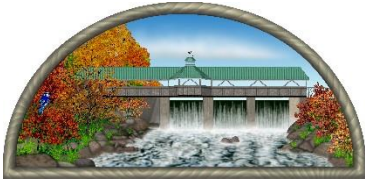
*****PLEASE PROVIDE AN EMAIL ADDRESS. IT WILL GREATLY IMPROVE THE COMMUNICATIONS BETWEEN ALL PARTICIPANTS*****

EMERGENCY CONTACT:
 NAME: _____ TEL#: _____

Are there any allergies or medications that organizers should be aware of while yourself/child is participating in this event? (use the back of paper if necessary).

	Program	Payment
I'M REGISTERING FOR BURK'S FALLS ARCHERY PROGRAM 5:30pm-6:30pm: YES___		\$30.00
I'M REGISTERING FOR BURK'S FALLS ARCHERY PROGRAM 7:00pm-8:00pm: YES___		\$30.00

Incomplete registration forms or registrations without full payment will not be accepted.
Can you be a volunteer for the program you are signing your up for? YES___ NO___



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**RELEASE OF LIABILITY, WAIVER OF CLAIMS
ASSUMPTION OF RISK AND INFORMED CONSENT**

By signing this document, you understand and accept the risks associated with the Event for yourself/your child as his or her parent or legal guardian. Please read carefully!

In consideration of permission, granted now or in the future by the Village of Burk's Falls (The Village) to participate in

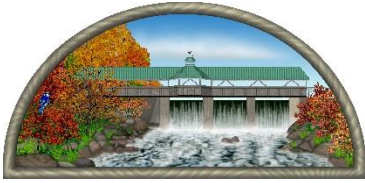
_____(The Event) on _____, 20 ____, I agree and acknowledge that:

1. _____ (Myself/my Child) has met all the prerequisites required for participation in The Event and will abide by its rules and regulations.
2. Participation in The Event has risks and hazards including risks associated with the novel corona virus and COVID-19. As a participant, Myself/my Child may suffer property damage, personal injury, and even death. I freely and voluntarily assume all the risks and hazards of participation, including any legal risks. This means that I am giving up My/my Child's right to sue the Village for any reason, including The Village's negligence, if Myself/my Child suffers any damage, injury, loss or death by participating in the Event.
3. I waive any claim I may have against The Village arising from Myself/my Child's participation in The Event, however it is caused, and I agree to indemnify and hold harmless The Village from all claims arising from Myself/my Child's participation in The Event.

DATED at The Village of Burk's Falls, Ontario this _____ day of _____, 20

List Participant Name(s)
1.
2.
3.
4.
5.

Signature of Participant/
Parent/Legal Guardian 18+



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Burk's Falls Archery Program COVID-19 Policies and Procedures

Overview

The Village of Burk's Falls goal is to mitigate the spread of Covid-19 by following the guidelines from the North Bay Parry Sound District Health Unit. Our staff, volunteers and participants health and safety are important to us as we work together to prevent the transmission of COVID-19.

Purpose

To ensure the health and safety of the Village of Burk's Falls Municipal staff, volunteers, and program participants, while attending our facilities and programs. All outlined procedures will remain in effect for the entire duration of the program you are participating in.

Scope

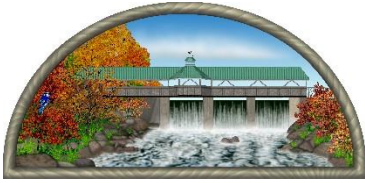
This policy must be followed by all staff and participants to mitigate the spread of COVID-19.

Safety Measures

- Arrive no more than 15 minutes prior to the program start time
- Face coverings are required upon entrance to the facility
- Physical distancing is required at all times (2m/6ft)
- If you are asthmatic, we suggest wearing a face shield/bandanna to allow for a more regular air flow
- Each shooter must clean and sanitize the bow and arrows between rounds
- Stay home if you are sick
- Avoid touching your face, eyes nose and mouth with your hands to prevent infection
- Cough or sneeze into your elbow. If you use a tissue, please discard it into the garbage and wash and sanitize your hands immediately
- You will be asked to leave should you show any signs or symptoms of illness
- Bring your own water bottle that is full, the fountains will remain closed
- Users must leave the building immediately after the program ends

Procedures

- Upon entrance to the facility it is recommended you wear a face covering and use the hand sanitizer stations placed just inside the main entrances
- Enter the ice surface from the left-hand side and find a chair on the ice surface
- Physical distancing is required at all times (2m/6ft)
- All participants must wash and sanitize their hands after using the washroom and if you cough/sneeze into your hands



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Staff Policy

- Responsible for enforcing Archery Program Policies and Procedures
- Must follow all guidelines laid out by the North Bay Parry Sound District Health Unit
- Clean commonly touched surfaces and disinfect equipment as needed
- Educate participants on cleaning equipment during the program
- Staff will not attend the program if they are ill, another staff will fill in
- Must always keep a physical distance of (2m/6ft) distance from all volunteers and participants even while instructing

Documents/Resources

- <https://www.myhealthunit.ca/en/health-topics/coronavirus.asp>

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND THE ARCHERY COVID-19 POLICY AND I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Participants Name

Date

Participants Signature 18+

Parent/Guardian Name

Date

Parent/Guardian Signature