Informed Consent for Cadet Training/Activity
Gliding – September 27, 2025

THIS FORM MUST BE READ AND SIGNED BY EVERY CADET WHO WISHES TO PARTICIPATE IN THIS ACTIVITY AS WELL AS BY A PARENT / GUARDIAN OF THE PARTICIPATING CADET.

Section 1 – Cadet Information

Last Name of Cadet:	First Name of Cadet:
Corps #: 700 David Hornell VC RCACS	Emergency Contact Name: (contact must be available for duration of the activity)
Telephone:	Emergency Contact Number: (contact must be available for duration of the activity)

Section 2 – Training / Activity Information

Cadet Training / Activities that will be conducted are: **Gliding, CFB Borden Gliding Centre**	
Location of Training/Activity: **90 Hanger Road**	**Dates of Training/Activity:** September 27, 2025

Section 3 – Parent/Guardian Consent (PLEASE READ CAREFULLY)

I consent to the participation of my son/daughter/ward in the activity described on this form. I am aware that the training/activities which the cadet will participate in contains hazards, elements of danger and a level of risk that may result in injury. I understand that these injuries may occur simply due to the nature of the activity and can occur without any fault of the cadet or RCSU Central Officers. By reading page two (2) and signing this form I am aware of the potential associated hazards and the steps taken to mitigate them. I also confirm that the emergency contact person will be reachable via phone for the duration of the activity. I acknowledge that it is my responsibility to advise the Department of National Defence through the submission of a Detailed Health Questionnaire, of any medical or health concerns of my child/ward, which may affect his/her participation in the stated program or activity.	
Name of Parent/Guardian:	Signature of Parent/Guardian:

Section 4 – Cadet Agreement (READ CAREFULLY AND INITIAL EACH PARAGRAPH)

	Initials
This training/activity has been explained and illustrated to me to my satisfaction and I understand the nature, hazards and risks that are involved.	
I am aware that the activity in which I plan to participate contains a certain level of risk and that I may suffer personal and potentially serious injury due to an unforeseeable or fortuitous event.	
I pledge to abide by all the directions and instructions issued by the Officer In Charge, CIC/COATS staff, senior cadets, guides or other supervisors.	
I hereby declare that I have understood each of the provisions of this agreement. Cadet Signature: _____ Date: _____	

HAZARDS AND MITIGATION STRATEGIES

1. Cadets will be standing, possibly outdoors and engaging with the public.

HAZARD	LIKELIHOOD (often, occasional, rare)	SEVERITY (severe, moderate, minor)	SAFETY MANAGEMENT STRATEGIES
Extreme Weather	Occasional	Minor ➡ Severe	Check forecast; appropriate clothing & equipment; pacing to maintain warmth;
Driving Accident	Rare	Minor ➡ Severe	Keep vehicles in good repair; check road conditions; monitor cadet behaviour in vehicle, ensure driver is competent
Allergic Reaction	Rare	Minor ➡ Severe	Check medical limitations prior to trip; instruct cadet to carry Auto Injector for allergic reactions; First Aid trained staff;
Environmental Injuries (Heat / Cold Injuries)	Occasional	Minor ➡ Severe	Self & staff instruction / monitoring; use proper clothing; appropriate pacing, carry emergency gear;