



BENOIT FIRST NATION

Mi'kmaw Centre

811 Oceanview Drive, Degrau, NL. A0N 1T1

Tel: (709) 757-9444

Benoit1stnation@gmail.com

www.benoitfirstnation.ca

Mi'kmaq Centre Participation Waiver

Participant's Name: _____ Signature: _____

Parent or Guardian: _____ Signature: _____
(for Participants under 18 years of age)

Address: _____ (Band Office Section)

Received By: _____
Signature: _____
Telephone: _____ Date received: _____

Allergies: _____

Please advise if participant has any other dislike for any food, drinks and/or anything else our Band Council should know. If any please list here:

__ I hereby give permission to publish information/photos of me/ my child in relation to activities as participants at the Mi'kmaw Centre and that we will not be tagged or identified by name with any photos posted on Social Media. This permission will be ongoing and does not expire.

Participants with Special needs must be accompanied by a parent or guardian at all times, as our workers and volunteers do not have the necessary training.

Legal obligations requires this policy and its sign-off for all participants. Please direct any questions to the Chief or designate.