



Application Form

Teacher Information: (Please Print)

First/Last Name:			
School:		Phone #:	
Grade:		# of Students:	
Mailing Address:			
Community:		Postal Code:	
Email Address:			

Kit Types:

- Cabin Building Kits - Single Use**
- Cabin Electricity Add On - Single Use**
- 4 in 1 Hydrolic Arm Kits - Reusable**
- K8 Robotics Kit - Reusable**
- Electric Car with Propellers - Reusable**
- Electric Car Kit - Reusable**
- Electricity Maker Kit - Reusable**
- Advanced Hydrolic Arm Kits - Reusable**
- Climate Action Kits - Reusable**
- House Building Kits - Single Use**
- Hydrolic Robotic Arm - Reusable**

Conditions Code of Conduct and Photo Release

I have read, understand, and agree to the following terms by signing the “Skills Try-A-Trade Registration Form” below.

Skills Canada Nunavut wants every teacher and student to have an enjoyable experience with maximum attention to safety and comfort. All individuals representing Skills Canada Nunavut on official business will be expected to conduct themselves in a manner best representing this student organization.

I agree, if for any reason, I am in violation of the rules of the activity, I may be brought before the appropriate discipline committee for an analysis of the violation(s), and I further agree to accept the penalty imposed on me, with the understanding that all such actions are explained to me, and further I realize that the severity of the penalty may increase with the severity of the violation, even to the extent of being excluded from all further Skills Canada Nunavut programs. It is with the spirit of being a proud and meaningful associate and/or member that I agree to these rules of conduct.

LIABILITY, MEDICAL and PHOTO RELEASE

I hereby agree to release Skills Canada Nunavut society, its representatives, agents, servants, and employees from liability for an injury to named person, resulting from any cause whatsoever occurring to the named person at any time while attending any Skills Canada Nunavut activities, including travel to and from these activities, excepting only such injury or damage resulting from willful acts of such representatives, agent, servants, and employees.

I do voluntarily authorize Skills Canada Nunavut to obtain routine or emergency diagnostic procedures and/or routine or emergency medical treatment for the named person as deemed necessary in medical judgment. I agree to indemnify and hold harmless Skills Canada Nunavut for any and all claims, demands, actions, rights of action, and/or on behalf of the named person arising from or on account of said procedures and/or treatment rendered in good faith and according to accepted medical standards.

I agree that still photographs and videotapes of me taken during all Skills Canada Nunavut activities may be used and reproduced by the Society in promotional materials and bulletins.

Having read and understood completely the “Volunteer Leader/Teacher Rules, Conditions & Code of Conduct” of Skills Canada Nunavut society, liability, and medical release and photo release I do hereby agree to follow the procedure and practices described.

Teacher Signature

Date