



**Consent to the use of Personal Information**

I hereby consent to and authorize Child Find Saskatchewan to assist in the search and location of my missing child(ren) and I hereby give Child Find Saskatchewan my permission to use the information and the photographs of my missing child(ren) submitted in this registration form at its discretion to facilitate finding my missing child(ren).

Specifically, I consent to and authorize Child Find Saskatchewan to publish the photographs of my child(ren) in newspapers, magazines, posters, flyers, on television, the internet and such other suitable places for the purposes of promoting identification of my missing child(ren).

This consent and authorization shall be considered sufficient to meet the requirements of any expressed consent provisions of *The Privacy Act*, *The Libel and Slander Act* or any other governing statute of the Province of Saskatchewan or of any other jurisdiction.

I further consent to and authorize Child Find Saskatchewan to disseminate the information contained within this registration form along with my child(ren)'s photograph(s) to appropriate organizations and authorities including: police departments, Child Find offices across Canada, and if required, any other law enforcement or searching agency nationally or internationally to facilitate locating my missing child(ren). Any directors, officers, members, employees, volunteers, agents, and funding partners of Child Find Saskatchewan hereby have my consent to use the information and photograph(s) I have supplied in the same manner as I have granted to Child Find Saskatchewan in this form. I declare that all of the information that I have submitted on this form is true and current and that it is my sole responsibility to inform Child Find Saskatchewan of changes affecting any of the above.

\_\_\_\_\_  
Please print name clearly:

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
Date:

**Child Find reserves the right to reject any registration  
Or terminate the search for any child(ren)**

## Waiver and Release of Liability

**This is a binding legal agreement. By signing this form you give up important legal rights.**

**PLEASE READ CAREFULLY, INITIAL and SIGN**

### AWARENESS AND ACKNOWLEDGEMENT OF RISKS

In consideration of my participation in the Child Find Saskatchewan program I, \_\_\_\_\_ hereby acknowledge that I have been made aware of the risks to my missing child(ren) and the hazards reasonably associated with or related to the dissemination of information and photographs to the public.

**I accept all related risks associated with this program:**

\_\_\_\_\_ (Initial here)

### WAIVER AND RELEASE FROM LIABILITY

In consideration of my participation in the Child Find program I, \_\_\_\_\_ on behalf of myself, my heirs, executors, and administrators, HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE the directors, officers, members, employees, volunteers, agents, and funding partners of Child Find Saskatchewan, FROM ANY AND ALL CLAIMS WHATSOEVER that I may have against Child Find Saskatchewan., its directors, officers, members, employees, volunteers, and agents, that may result from my participation in the above program, NOTWITHSTANDING that the loss may have been contributed to or occasioned by the NEGLIGENCE of any one or more of the above referenced parties.

**I have read the waiver and I agree to waive my legal right to sue:**

\_\_\_\_\_ (Initial here)

**I HEREBY ACKNOWLEDGE HAVING READ, UNDERSTOOD AND AGREED to the above AWARENESS AND ACKNOWLEDGMENT OF RISKS and WAIVER AND RELEASE FROM LIABILITY and HAVE EXECUTED THIS AGREEMENT VOLUNTARILY.**

**I HEREBY ACKNOWLEDGE THAT I HAVE BEEN ADVISED THAT SHOULD I HAVE DIFFICULTIES UNDERSTANDING THE CONTENT OR THE CONSEQUENCES OF SIGNING THIS DOCUMENT, I SHOULD SEEK INDEPENDENT LEGAL ADVICE BEFORE SIGNING IT.**

\_\_\_\_\_  
Please print name clearly:

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
Date: