

Grandview Children's Centre Therapeutic Recreation External Support Worker Release Form

External Support Worker Release Form
I,, certify that
(Parent/Guardian) (Support Worker)
has been hired by me to provide support for my child while participating in a Grandview Children's Centre therapeutic recreation program.
Support arrangements are as follows:
Program Name : Date/Duration Program Time:
Program Name:
Date/Duration Program Time:
The outside support worker:
 is 16 years of age or older; will provide Grandview Children's Centre with a criminal reference check that includes the vulnerable sector check 72 hours prior to the program start understands that he/she is employed by the parent/guardian stated above and not employed by Grandview Children's Centre; will work co-operatively with Grandview Children's Centre staff to ensure that therapeutic recreation goals are achieved; will abide by Grandview Children's Centre client supervision policies; will sign a Grandview Children's Centre Confidentiality agreement.
I acknowledge that Grandview Children's Centre shall be released and saved harmless from any liability resulting from the above-named workers support.
Parent/Guardian: Date:
Outside Support Worker: Date:

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Registered Charitable Organization