



POLICY NUMBER:	APP.FBC.B.5	APPROVAL DATE:	LAST REVISED:
		June 26, 1995	March 1, 1999

RELEASE AND INDEMNIFICATION ACKNOWLEDGEMENT

In consideration of the Wellington Catholic District School Board (hereinafter referred to as “the Board”) facilitating _____ continued attendance and education at _____ and in
Student *School*
 further consideration of the Board acknowledging that it will use its best efforts to give effect to the request of
 _____ abide by the intent of the “Do Not Resuscitate” code as it pertains to

Parent/Guardian

Student

And whereas the Board has agreed to use its best efforts to abide by the intent of the “Do Not Resuscitate” code on the basis that Dr. _____ has indicated to the Board by correspondence dated

Doctor
 _____ that the “Do Not Resuscitate” code is in the best interest of _____
date *Student*

And whereas _____ acknowledge that they have agreed to have a

Parent/Guardian
 registered nurse in attendance with _____ at all times when _____ will be in

Student *Student*
 attendance at school.

And whereas _____ acknowledge that the registered nurse in

Parent/Guardian
 attendance with _____ will at all times be solely responsible to determine the appropriate

Student
 medical treatment or decisions pertaining to _____ in lieu of any duties which would

Student
 otherwise come within the responsibility of the Board in this regard.

And whereas _____ acknowledge and agree that in the event that

Parent/Guardian
 the registered nurse is not in attendance with _____ and is not available at a time when it

Student
 appears that _____ requires medical attention or assistance, the Board will **not** abide by the

Student

“Do Not Resuscitate” code and will proceed to seek medical attention for _____ to protect and safeguard his/her health as it would for any other student entrusted to its care.
Student

And whereas _____ acknowledge that notwithstanding the Board will notify its employees at the school of the existence of the “Do Not Resuscitate” code and further that the Board will use its best efforts to comply with the intent of the request, the Board cannot guarantee or be responsible for any individuals reaction or response which might be inconsistent with the “Do Not Resuscitate” code.
Parent/Guardian

_____ hereby release, save harmless, and agree to indemnify the Board and its servants, agents or employees from any or all claims, causes of actions or demands, howsoever, arising, directly or indirectly as a result of or in consequence of the “Do Not Resuscitate” code as it pertains to _____.
Parent/Guardian
Student

Dated at Guelph this _____ day of _____ 1995.

Name of Student _____

Signature of Parent/Guardian
or Competent Adult Student _____

Witness _____