



## Nanaimo North Teen Lock-In Permission Form - PARENT/GUARDIAN COPY

EVENT: 2025 Lord of the Rings Teen Lock-In

EVENT DATE: Friday, January 31, 2025 from 5:30-8:30 pm

EVENT LOCATION: Nanaimo North Library, 6250 Hammond Bay Road

DROP OFF TIME: 5:15-5:30 pm – at 5:30, the library doors will be locked!

PICK UP TIME: 8:30-8:45 pm by an approved adult.

- Participants must be **12-18** years of age on or before January 31, 2025 in order to attend this program.
- The library will close at 5pm, and doors will reopen to admit registered participants only at 5:15. The doors will be locked again at 5:30pm. All participants **must** be in the library by 5:30 to attend the lock-in. **Late arrivals will not be admitted.**
- I understand this program may include the following activities, and my child has permission to participate in all of them:
  - Games, electronic and tabletop
  - Crafts
  - Escape Room
- We will also be serving pizza (including meatless), snacks, and soft drinks, so please indicate on the attached page if your child has any life-threatening allergies.\* We are unable to guarantee that we can accommodate other special dietary needs, so please ensure that your child has eaten and/or brings suitable snacks to the event if this is a concern.
- Pickup will be from **8:30-8:45 pm**. Teens must be picked up from the library **no later than 8:45 pm by an approved adult**. The person picking you up **must meet you at the door**; you will not be released to someone in a waiting car. Teens with permission to walk home will be allowed to leave on their own.
- Participants will not be allowed to leave early, except in cases of emergency or illness, and only with an approved adult.
- Teens agree to follow all the rules of behaviour in the library, including:
  - Listening to and following direction of staff;
  - Staying out of areas designated off-limits;
  - Respecting all participants.
- If a teen is unable to follow direction of library staff, they will be given two warnings before they will be asked to call a parent to leave early.
- There will be at least two staff members present during the lock-in, with the adult:teen ratio being no more than 15 teens per adult.

If you need to reach your child in the event of an **emergency**, and cannot reach them on their own cell phone, you may contact librarian Julie Carter at 250-895-1371.

**PARENT/GUARDIAN COPY: PLEASE KEEP**



# Nanaimo North Teen Lock-In Permission Form - LIBRARY COPY

In order for your teen to participate in the Teen Lock-in program at the Nanaimo North Library on **Friday, January 31**, this permission slip must be completed, signed – by both you and your teen – and returned to the Nanaimo North Library by **8:00 pm on Thursday, January 30**. You can also email a scan/photo of it back to us at [nanaimonorth@virl.bc.ca](mailto:nanaimonorth@virl.bc.ca). **Late forms will not be accepted.**

By signing this form, I, the legal parent/guardian of the undersigned teen, indicate that both I and my child have read, understand, and agree to the conditions in this document; and that I give my permission for my child to attend this event and participate fully in the activities.

**I understand and accept the normal risks inherent to such an activity or program, and that Vancouver Island Regional Library cannot guarantee the safety of program participants. In case of emergency, I request efforts be made to contact me or the person I have named below for this purpose. If I or my named alternate cannot be reached, or if it is prudent to render immediate aid, I hereby give permission Vancouver Island Regional Library personnel to use their best judgment in assisting my ill or injured child and in arranging medical attention. I hereby agree to indemnify and hold harmless Vancouver Island Regional Library, its agents, and employees for this activity.**

**I give permission to Vancouver Island Regional Library to use my child’s image in photos or video taken at this event in order to publicize or promote library activities, including the library’s website and social media pages, unless indicated below. Names of participants will not be posted or published.**

I do not wish for my child’s image to be used.

\_\_\_\_\_  
NAME OF TEEN BIRTHDATE

\_\_\_\_\_  
SIGNATURE OF TEEN DATE

\_\_\_\_\_  
NAME OF PARENT/GUARDIAN

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN DATE

TELEPHONE: PRIMARY #: \_\_\_\_\_ ALTERNATE #: \_\_\_\_\_

MY CHILD WILL BE PICKED UP BY: \_\_\_\_\_

MY CHILD HAS MY PERMISSION TO WALK HOME

**EMERGENCY CONTACT IF PARENT/GUARDIAN IS UNAVAILABLE:**

NAME: \_\_\_\_\_

TELEPHONE: CELL/HOME \_\_\_\_\_

NAME(S) OF ANYONE **NOT** ALLOWED TO PICK UP YOUR CHILD:  
\_\_\_\_\_

\*SEVERE ALLERGIES – please list here: \_\_\_\_\_

**LIBRARY COPY: PLEASE RETURN TO LIBRARY STAFF**