

**(Insert Name of Club and Organizing Event) (Insert date of event)**

**WAIVER OF LIABILITY**

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| WARNING! BY SIGNING THIS FORM YOU GIVE UP IMPORTANT LEGAL RIGHTS  **INCLUDING THE RIGHT TO SUE**  **PLEASE READ CAREFULLY! PARTICIPANTS MUST BE 18 OR OLDER** |

NAME OF PARTICIPANT:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Please print)**

ADDRESS OF PARTICIPANT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BIRTH DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMERGENCY CONTACT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DISCLAIMER CLAUSE**

The Trustees of Carleton University Students’ Association Inc. AND **(club inserted in heading)**, their agents, officers, directors, employees, volunteers, contractors, or representatives (hereinafter refer to as “THE RELEASEES) are not responsible for any death,

injury, loss or damage of any kind suffered by any person while participating in **(insert name of**

**event)** and all related activities of **(insert name of Event)**, including injury, loss or damage which might be caused by the negligence of THE RELEASEES

**Initials \_\_\_\_\_\_**

**(insert name of event/trip)** includes transportation to and from Carleton University by **(insert**

**type of transportation)**, visits to **(This section should include a short summary of the**

**itinerary, highlighting the major details of transportation, accommodation and anything**

**pertaining group schedule or free time)**

**DESCRIPTION OF RISKS**

In consideration of my participation in **(insert name of event)** program and all related activities, I acknowledge that I am aware of the possible RISKS, DANGERS AND HAZARDS associated with **(insert name of event**) program and all related activities including THE POSSIBLE RISK OF SEVERE OR FATAL INJURY TO MYSELF OR OTHERS. These risks include, but are not limited to**: (Insert a list of the most obvious risks faced by the participants during the event)**

• Risks associated with travel to and from all venues of the various components including

transport by public or private motor vehicle which could include but are not limited to an

accident resulting in severe physical injuries or death;

• Intoxication and/or alcohol poisoning from the alcohol I consume during **(insert name of**

**event)** program and all related activities whether voluntarily or through coercion resulting

in illness, injury or death;

• Food-related illness resulting from any meal arranged for me by **(insert name of event**)

organizers;

• Muscular injuries and soft tissue injuries, broken bones, bruises, scrapes, cuts, sprains,

dislocation, head, facial eye and/or dental injuries which might result from participation in

**(insert name of event/trip);**

• Injuries resulting from falling or being knocked down or steep steps where a fall may cause

injury or death;

• Injuries resulting from rough terrain, failure to see an obstacle, failure to negotiate a turn, etc.;

• Injuries resulting from walking on a hill, slipping and/or falling;

• Injuries resulting from malfunctioning of equipment or misuse of equipment whether

owned, designed or operated by myself or the staff of the Releasees;

• Changes in weather or temperatures which may result in hypothermia, frostbite, windburn,

sunburn, colds or flu;

• Death, injuries or illness resulting from failure to follow directions from those in charge of

the program and all related activities;

• The risks associated with returning to my residence after participating in the program

and/or related activities; and

• Other risks associated with being a spectator of or being present at a crowded, outdoor or

indoor venue.

**Initials \_\_\_\_\_\_**

**MEDICAL/HEALTH & TRAVEL INSURANCE**

**1. I AM SOLELY RESPONSIBLE** to select and purchase adequate medical/health insurance.

The Releasees will provide **no** medical/health insurance. In the of a medical/health problem, the

Releasees accept no responsibility for any costs associated with a medical/health problem nor

will they pay for any medical/health expenses that may be incurred by the participant.

**2. I AM SOLELY RESPONSIBLE** to select and purchase adequate travel insurance. The

Releasees will provide **no** travel insurance. The travel insurance should provide cover against

theft, personal accident, personal liability, repatriation and cancellation of tickets among other

coverages. The Releasees accept **no** responsibility for any costs associated with these types of

problems nor will they pay for any expenses that may be incurred by the participant relating to

these areas.

I freely accept and assume all responsibility to provide myself with medical/health and travel

insurance coverage.

**Initials \_\_\_\_\_\_**

**INDEMNIFICATION AND RELEASE OF LIABILITY**

In return for allowing me to voluntarily participate in the program and all related activities, I agree:

**1. TO ASSUME AND ACCEPT ALL RISKS** arising out of, associated with or related to my

participation in the **(insert name of event/trip)** program and all related activities, even though

such risks may be caused by the negligence of the Releasees**;**

**2. TO BE SOLELY RESPONSIBLE FOR ANY INJURY, LOSS OR DAMAGE** which I might

sustain while participating in **(insert name of event/trip)** program and all related activities, even

though such injury, loss or damage may have been caused by the negligence of The Releasees;

**3. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES** from any and all liability for any

damage to the personal property of, or personal injury to, any third party resulting from my

participation in the **(insert name of event/trip)** program and all related activities;

**4. TO HOLD HARMLESS, INDEMNIFY AND RELEASE THE RELEASEES**, their officers,

directors, agents, volunteers, employees and representatives from liability for any and all claims,

demands, actions and costs which might arise out of my participation in **(insert name of**

**event/trip)** program and all related activities, even though such claims, demands, actions and

costs may be been caused by the negligence of The Releasees.

**Initials \_\_\_\_\_\_**

**MEDICAL CONDITIONS**

I agree to advise the organizers of the Event prior to the start of the activity of any existing medical

conditions or injury

**Initials \_\_\_\_\_\_**

**ACKNOWLEDGEMENT**

**I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD THIS AGREEMENT**, that I have executed this agreement voluntarily, and that this agreement is to be binding upon myself, my heirs, executors, administrators and representatives.

**SIGNED THIS\_\_\_\_\_\_\_\_\_ day of , 20\_\_\_\_ , at Ottawa Ontario.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Participant**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Witness**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed Name of Witness**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address & Phone No. of Witness**