



Release of Liability, Waiver of Claims, Assumptions of Risks & Indemnity Agreement

By signing this document you will waive certain legal rights, including the right to sue.

** Excludes any legal rights covered under the Workers Compensation Board*

PLEASE READ CAREFULLY

AWARENESS & ASSUMPTION OF RISK

I am aware that my attendance at or participation in activities and events both on and off the water carries with it certain inherent risks and dangers that cannot be eliminated regardless of the care taken to avoid injuries. I also understand the physical demands these activities/events presents and affirm to the best of my knowledge, my physical condition (or that of my minor participant) is adequate for me (or my minor participant) to participate safely. My participation (or that of my minor) in or attendance at any activity/event is voluntary and by signing below I knowingly and completely assume the foregoing risks.

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

In consideration of my participation in or attendance at an activity or event, I hereby waive, release and forever discharge Mic Mac Amateur Aquatic Club (MMAAC) and Others from and against all claims and demands, loss, costs, damages, actions, causes of action, suits or proceedings by whomsoever made, brought, or prosecuted in a manner, related to any loss, property damage, personal injury or death, resulting from, occasioned by or attributable in any way to my acts or omissions resulting from my participation in or attendance.

I hereby agree to indemnify and save harmless MMAAC, and Others from any and all liability for any damage to property of, or personal injury to, any third party, resulting from my participation in an activity or event.

This agreement is binding on not only myself but my next of kin, heirs, executors, administrators and assigns.

ACKNOWLEDGEMENT AND UNDERSTANDING

I acknowledge having read this assumption of risks, waiver of liability and indemnity agreement, and understand that this Agreement is intended to be broad and all-inclusive so as to preclude any claims and that I have the legal capacity to sign, or if I am a minor, have discussed fully with my parent or guardian.

Signed this _____ day of _____, 20_____

Print Participant's Name

Print Parent/Guardian Name
(If participant is under 19 years of age)

Participant's Signature

Parent/Guardian Signature
(If participant is under 19 years of age)

Email Address: _____

Mobile #: _____

Provider: _____