

RELEASE OF CLAIMS AND WAIVER OF LIABILITY FORM

BETWEEN

Centre Communautaire Franc-Ouest d'Ottawa - Carleton

AND _____

(Participant's Name)

IN RESPECT OF THE _____

(Describe the program/activity)

TO BE HELD/LOCATED AT: _____

DATE: _____

Please read carefully before signing

As a participant in the above-described program/activity, I fully understand, acknowledge and agree to the following:

- I am aware there may be inherent risks to participating in the above-described program/activity.
- I agree to abide by the rules and regulations, policies and procedures of the Community Group.
- I am **unaware** of any health related problems that I may have that could cause injury to myself while engaging in the above-described program/activity.
- I have full knowledge of the nature and extent of the risks involved in participating in the above-described program/activity. I am voluntarily assuming the risks involved in participating in the above-described program/activity and in doing so I fully understand that I will be solely responsible for any injury, loss or damage I cause or sustain.

In case of emergency, the following contact information must be provided:

Name: _____ Relationship: _____

Address: _____

Tele. No.: _____(H) _____(O)

Provide important health information that the Community Group should be aware of that could affect you while participating in the above-described program/activity:

To be completed and signed by the participant if the participant is the full age of 18 years and over.

I agree to indemnify and hold harmless the above-described Community Group and the City of Ottawa liable from all claims, demands, causes of action, loss, costs or damages that the above-described Community Group may suffer, incur or be liable for in relation to any injury I may suffer or cause to others in connection with my negligence or while participating in the above-described program/activity. I hereby release, waive, and discharge the above-described Community Group and the City of Ottawa from all liability to my heirs, executors, administrators, and assigns for all loss or damage and any claims or demands for such loss or damage on account of injury to person or property.

I am the full age of 18 years. I am aware of the nature and effect of the **RELEASE OF ALL CLAIMS AND WAIVER OF LIABILITY FORM** that I am signing. I am executing this release and waiver of liability agreement freely and without any compulsion on the part of the above-described Community Group or the City of Ottawa, I acknowledge to having read this entire agreement prior to having signed it. Intending to be legally bound, I have signed this **RELEASE AND WAIVER OF LIABILITY FORM** this _____ day of _____ 200 .

WARNING: BY SIGNING THIS FORM, I ACKNOWLEDGE HAVING READ, UNDERSTOOD AND AGREE TO THE ABOVE CONDITIONS, RELEASE AND WAIVER.

Participant print your name

Signature of participant

Date

Witness, print your name

Signature of Witness

Date

If the participant is *under 18* years of age, a parent or legal guardian is required to sign:

My child _____, a minor pursuant to the *Age of Majority and Accountability Act*, has my permission to participate in the above-described program/activity on _____ (date). As the parent/legal guardian, my child and I fully understand and have full knowledge of the nature and extent of the **risks** involved with my child participating in the above-described program/activity. I, and my child agree to indemnify and hold harmless the above-described Community Group and the City of Ottawa liable from all claims, demands, causes of action, loss, costs or damages that the above-described Community Group may suffer, incur or be liable for in relation to any injury my child may suffer or cause to others in connection with my child's negligence or while my child is participating in the above-described program/activity. I, and my child hereby release, waive, and discharge the above-described Community Group and the City of Ottawa from all liability to our heirs, executors, administrators, and assigns for all loss or damage and any claims or demands for such loss or damage on account of injury to person or property.

WARNING: BY SIGNING THIS FORM, I/MY CHILD ACKNOWLEDGES HAVING READ, UNDERSTOOD AND AGREE TO THE ABOVE CONDITIONS, RELEASE AND WAIVER.

Parent/Legal Guardian, print your name Signature of Parent/Legal Guardian Date

Participant print your name,
if 10 years of age and over Signature of participant
if 10 years of age and over Date

Witness, print your name Signature of Witness Date

Note to Community Association representatives:

Participants that have formally registered in a program/activity being provided by your Community Association should complete and sign this waiver. Such copies should be maintained on file by the Community Association.