

**Waiver and Release of Liability Form (all participants must sign)**

I am participating in the Rideau Canoe Club Dragon Boat Program at my own risk and waive all claims of every nature against The Rideau Canoe Club, its coaching staff, board of directors, members of the Rideau Canoe Club and sanctioning bodies, in respect to any personal loss or damage, illness, bodily injury or death resulting from participating in the program or caused by third parties during the program.

I and my next-of-kin are duly aware of the risks and hazards inherent in both the sport of paddling and entering the premises used for the purposes of launching, docking and storing equipment used in the sport of paddling, and specifically in participating in the Dragon Boat practice sessions held at the Rideau Canoe Club, knowing conditions may be hazardous and dangerous and that obstruction may exist, and that high winds may cause rough water, and that I hereby give notice that I am a competent swimmer and that I voluntarily assume all risks of loss, damage or injury, including death, that may be sustained by me or to any property in or upon said premises.

I agree to properly wear, at all times, during the practice sessions, an approved flotation device or life jacket.

In signing the foregoing release, I hereby acknowledge and represent that I have read the foregoing release, I understand it and agree to it voluntarily, that I am 18 years of age or older and of sound mind, or being less than 18 years of age have co-signed with parent or guardian, as the case may be.

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

Full Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian's Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Witness (please print): \_\_\_\_\_

Signature: \_\_\_\_\_

Full Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian's Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Witness (please print): \_\_\_\_\_

Signature: \_\_\_\_\_

Full Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian's Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Witness (please print): \_\_\_\_\_

Signature: \_\_\_\_\_