PLACENTIA ROWING CLUB INC. WAIVER AND RELEASE OF LIABILITY

This document must be read in its entirety, signed, and returned to the Regatta Committee before participating in any Regatta Committee activity.

In consideration of being allowed to participate in any activity organized and/or supervised by the Placentia Rowing Club Inc. (the "Committee"), the undersigned acknowledges, understands, and agrees that:

- 1. The risk of injury and/or death from participation in any activity on Southeast Arm exists, and no preplanning, rules, or equipment can remove all such risk, AND THEREFORE BY PARTICIPATING IN SUCH ACTIVITIES, I UNDERSTAND THAT I MAY BE SUBJECT TO SUCH RISK OR PERSONAL INJURY; AND
- 2. I KNOWINGLY, WILLINGLY AND VOLUNTARILY ASSUME ALL SUCH RISKS OF INJURY, both known and unknown, regardless of severity of risk and/or injury, EVEN IF ARISING FROM THE NEGLIGENCE OF THE PLACENTIA ROWING CLUB INC., ITS EMPLOYEES, OR AGENTS, and
- 3. I, for myself and on behalf of my heirs, assigns, personal representatives, and next of kin (hereinafter collectively referred to as "I"), hereby release the Placentia Rowing Club Inc., its employers, directors, members, officers, or any other agents, FROM ANY LIABILITY WHATSOEVER WITH RESPECT TO DISABILITY, DEATH, OR ANY AND ALL INJURY, LOSS OR DAMAGE TO PERSON OR PROPERTY, WHETHER CAUSED BY THE NEGLIGENCE OF THE PLACENTIA ROWING CLUB INC., ITS EMPLOYEES OR AGENTS, OR OTHERWISE; and
- 4. I HEREBY INDEMNIFY AND HOLD HARMLESS THE PLACENTIA ROWING CLUB INC., its employees, directors, members, officers, or any other agents, OF ANY AND ALL CAUSES OF ACTION, CLAIMS, DEMANDS, LOSSES, OR COSTS OF ANY NATURE WHATSOEVER, arising out of or in any way related to my participation in the Regatta and its program;
- 5. I HEREBY WAIVE ALL RIGHTS TO FILE OR PROSECUTE ANY CIVIL ACTION AGAINST THE PLACENTIA ROWING CLUB INC., its employees, directors, members, officers, or any other agents, FOR DISABILITY, DEATH, OR FOR ANY INJURY, LOSS OR DAMAGE TO PERSON OR PROPERTY IN ANY WAY RELATED TO OR RESULTING FROM MY PARTICIPATION IN ANY ACTIVITY ORGANIZED and/or SUPERVISED by the Committee.

I have read this agreement and fully understand the terms specified in items 1 through 5 listed above, and I am freely and voluntarily agreeing to such terms by signing below, thereby executing this agreement at Placentia.

Last Name		Given Names		
Date of Birth		Address		
Contact Number		City, Province		
Emergency Contact (Name and #)		Postal Code		
Team Name			Rower	Coxswain
Signature				
Parents/Guardians FOR PARTICIPANTS ABOVE WHO ARE NOT AT LEAST 19 YEARS OF AGE				

This is to certify that, I, as parent/guardian with legal responsibility for the above-noted participant, and, for myself, my heirs, assigns and next of kin, HEREBY CONSENT AND VOLUNTARILY AGREE TO ALL TERMS AND CONDITIONS SET FORTH IN THE ABOVE AGREEMENT WITH RESPECT TO MY MINOR CHILD'S USE OF THE FACILITIES AND ANY AND ALL LIABILITIES RESULTING FROM THIS USE, by signing below. Signature Name (PRINT) Date