

**RELEASE OF LIABILITY AND INDEMNITY AGREEMENT  
BY SIGNING THIS RELEASE YOU WILL WAIVE  
CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE.**

**\*\*PLEASE READ CAREFULLY\*\***

TO: VERNON PADDLING CENTRE SOCIETY (THE CLUB), ALL SPONSORS, JOINT VENTURERS, DIRECTORS, REPRESENTATIVES, VOLUNTEERS, OFFICIALS, AGENTS, AND OFFICERS OF VERNON RACING CANOE CLUB (COLLECTIVELY CALLED THE "HOST"):

I AM AWARE OF AND UNDERSTAND THAT THE SPORT OF PADDLING HAS INHERENT DANGERS, HAZARDS, AND RISKS (COLLECTIVELY CALLED "RISKS").

THE FOLLOWING IS ONLY A PARTIAL LIST OF THESE RISKS:

NEGLIGENCE OF THE HOST; WEATHER/WATER CONDITIONS; FAILURE OF EQUIPMENT; COLLISION BETWEEN BOATS AND OTHER WATERCRAFT; NEGLIGENCE OF THE ESCORT BOAT/DRIVER

I UNDERSTAND THAT INJURIES RESULTING FROM SUCH RISKS ARE COMMON AND ORDINARY OCCURRENCE OF THE SPORT. I FREELY ACCEPT AND FULLY ASSUME ALL THE RISKS AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, PROPERTY DAMAGE OR LOSS RESULTING FROM BEING A PARTICIPANT AND/OR MEMBER OF THE CLUB.

I HAVE READ AND UNDERSTAND THE RULES AND THIS RELEASE, AND I AGREE TO ABIDE BY THEM. I ACKNOWLEDGE THAT IT IS MY SOLE RESPONSIBILITY TO ACT IN SUCH A MANNER AS TO BE RESPONSIBLE FOR MY OWN SAFETY AND PARTICIPATE WITHIN MY OWN LIMITS. I UNDERSTAND THAT THESE RULES ARE SOLELY FOR THE PURPOSE OF REGULATING THIS CLUB.

I, (TOGETHER WITH MY HEIRS, NEXT-OF-KIN, EXECUTORS, ADMINISTRATORS, AND ASSIGNEES, COLLECTIVELY CALLED "LEGAL REPRESENTATIVES") AGREE AS FOLLOWS:

1. TO WAIVE ANY AND ALL CLAIMS THAT I MAY HAVE AGAINST THE HOST;
2. TO RELEASE THE HOST FROM ANY AND ALL LIABILITY FOR ANY LOSS, DAMAGE, INJURY, OR EXPENSE THAT I OR MY LEGAL REPRESENTATIVES MAY SUFFER AS A RESULT OF MY PARTICIPATION DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE ON THE PART OF THE HOST;

3. TO HOLD HARMLESS AND INDEMNIFY THE HOST FROM ANY AND ALL LIABILITY FOR ANY PROPERTY DAMAGE OR PERSONAL INJURY TO ANY THIRD PARTY RESULTING FROM MY PARTICIPATION.

MEMBER/PARTICIPANT'S SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_

PRINTED NAME OF PARTICIPANT: \_\_\_\_\_

IF UNDER 18, GUARDIAN/PARENT SIGNATURE: \_\_\_\_\_

PRINTED NAME OF GUARDIAN/PARENT: \_\_\_\_\_

WITNESS SIGNATURE: \_\_\_\_\_

PRINTED NAME OF WITNESS: \_\_\_\_\_