

WAIVER OF LIABILITY RELEASE, INDEMNIFICATION AND HOLD HARMLESS NOTICE

RUSTY DRAGON ADVENTURES (RDA) - 2016

Instructions: Please print a hard-copy of this Waiver form, read it carefully, and then complete all sections in pen or fine-tipped permanent marker. Please contact your team captain or team manager if you have any questions. You should then bring the original signed and dated form to your first RDA event or practice. Thank you!

(Confidential when completed)

I, _____, including representatives of my estate, assignees, etc.,
(Please print name)

in consideration for receiving permission to participate in activities of the **Rusty Dragon Adventures (aka "Rusty Dragons")**, hereby agree to release, indemnify and hold harmless the **Rusty Dragons**, their agents, the **Dominion Day Regatta Association (DDRA)**, **Lively Dragon**, **Great White North Communications Inc (GWN)**, **City of Toronto**, **Balmy Beach Canoe Club (BBCC)**, **Beaches Lions Club**, **Toronto Health Centre**, **Dragon Boat Canada**, **Canadian Breast Cancer Foundation (CBCF)**, **Canadian Council of the Blind (CCB)**, **CCB Dragon Boat Toronto**, **International Breast Cancer Paddlers Commission (IBCPC)**, **Ontario Public Service (OPS)**, **Canadian National Institute for the Blind (CNIB)**, members, executive, representatives, sponsors, partners, licensors, volunteers, and employees, from any and all liabilities, tort claims, injuries, damages, expenses, actions, contractual (oral, written or in any other form) arising in connection with my (our) participation. Specifically such activities including but not limited to: Dragon boat festivals, practices, preparation, exercise on land or water, paddling activities on water or pool-side (indoor training), travel to and from all sites, transportation of equipment to and from storage to practice area, orientation sessions, gym or studio activities, or any social events such as dinners, shows, or events attended, etc.

I, _____, [CAN] / [CANNOT] swim 100 meters with a life vest on.
(Please print name) (Please circle one)

I have read the agreement and understand its terms as construed under the laws of the Province of Ontario.

Address: _____ Gender (M/F): _____

E-mail Address: _____ Birth Date: _____

Allergies or medical problems: _____

Phone No: (_____) _____ E-mail: _____

EMERGENCY CONTACTS

Name: _____ Relationship: _____
(Please print name)

Daytime phone # (_____) _____

Alternate Contact: Name _____ Phone: (_____) _____

SIGNATURE(S)

Signature: _____ **Date** _____ **Age (if under 18):** _____

Signature of Parent/Guardian (if participant under 18 years of age)...

Parent/Guardian: _____ Signature: _____
(Please print name)

Note: Please see www.RustyDragons.ca for more information on the RDA.

(Form Version: 2016Mar10)