INFORMED CONSENT and WAIVER FORM

I ________________________________ on behalf of myself, my heirs, executors, administrators, and assignees, hereby acknowledge that I am participating in the Canoeing activities through Parks and Recreation with St. Mary’s Boat Club connected herewith at my sole risk. I exonerate and release DALHOUSIE UNIVERSITY, its agents, servants, employees, and all who act on its behalf from all responsibility and claims for any injury that I may suffer while participating in such a program.

I/WE, the UNDERSIGNED, hereby acknowledge that certain RISKS OF INJURY are inherent to participation in sports and recreation activities. These types of injuries may be minor or serious and may result from one’s own actions or the actions or inactions of others, or a combination of both.

I/WE understand that the RULES AND REGULATIONS of Parks and Recreation St. Mary’s Boat Club are designed for the safety and protection of participants and hereby undertake to abide by their rules and regulations.

I/WE understand that certain activities require a minimum LEVEL OF FITNESS AND HEALTH (physical, mental and emotional) and that each person has a different capacity for participating in these activities.

I/WE hereby warrant being physically fit to participate and understand that the CHOICE to participate brings with it the ASSUMPTION OF THOSE RISKS AND RESULTS which are part of these activities.

I/WE agree that DALHOUSIE UNIVERSITY and its officers, employees, agents and volunteers SHALL NOT BE LIABLE for any injury to my person or loss or damage to my personal property arising from, or in any way resulting from, my participation in these activities, UNLESS such injury, loss or damage is caused by the SOLE NEGLIGENCE of the University or its representatives while acting within the scope of their duties.

I/WE declare having read and understood the above INFORMED CONSENT AND WAIVER AGREEMENT in its entirety and hereby consent to participate acknowledging all of the foregoing.

____________________________________
(Print name)

____________________________________
(Signature)

_______________________
(Date)