



RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS & INDEMNITY AGREEMENT

By signing this document you are waiving certain legal rights, including the right to sue.

PLEASE READ CAREFULLY!

INITIAL:

Participant Name: (Please Print) _____ Student ID#: _____

Emergency Contact: _____ Telephone #: _____

TO: THE UNIVERSITY OF LETHBRIDGE (THE "UOFL")

THE SPORT CLUB ACTIVITY: The University organizes a lifesaving club (the "Club") that coaches participants in lifesaving skills within an aquatic environment; additionally in part of the club activities there exists the opportunity to compete in lifesaving competitions held locally within the City of Lethbridge, AB, provincially in AB, nationally in Canada and/or potentially internationally for the club year beginning September 1, 2014 and continuing through to Aug 31, 2015 (all hereinafter collectively referred to as "the Club Activities").

ASSUMPTION OF RISKS: I fully understand, acknowledge and agree that participation with the Club and the Club Activities has inherent risks and dangers, not all of which can be listed but may include:

- symptoms arising from this type of sporting activity and related physical exertion;
• risks associated with transportation to attend club activities such as mechanical failure, traffic collision and human error; and

I HEREBY ACCEPT AND ASSUME any and all of the risks, including the possibility of death, personal injury, property damage and loss, resulting from my participation in any and all of the Club Activities.

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT: In consideration of the UofL and the Club permitting me to participate in any and all of the Club Activities, I hereby agree:

- TO RELEASE THE CLUB, THE UOFL AND THEIR OFFICERS, DIRECTORS, AGENTS OR EMPLOYEES (the "RELEASEES") from any and all liability for any personal injury, disability, death, property damage or loss I may suffer as a result of my participation in any and all of the Club Activities, FOR ANY CAUSE WHATSOEVER, including negligence or breach of contract or breach of any legal or statutory duty, on the part of the Releasees, including any failure to protect or safeguard me from injury, disability, death or loss;
• TO WAIVE ANY AND ALL CLAIMS, DEMANDS, SUITS AND ACTIONS that I or my heirs, successors, executors, administrators, representatives and assigns may have against THE RELEASEES for any personal injury, disability, death, property damage or loss arising directly or indirectly from my participation in any and all of the Club Activities;
• TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any property damage or losses or injury to any third party resulting from my participation any and all of the Club Activities; and
• TO AGREE this agreement shall be governed by and interpreted in accordance with the laws in the Province of Alberta.

HEALTH CARE COVERAGE: I acknowledge that I am responsible for my own health insurance. I understand and agree that the RELEASEES are not responsible for any health or medical or dental expense I may incur as a result of the Event.

I HAVE READ AND UNDERSTOOD THIS AGREEMENT PRIOR TO SIGNING IT, AND I AGREE TO BE BOUND BY ITS TERMS.

Participant Signature: _____ Date: _____

Witness Name: _____ Signature: _____ Date: _____