

# PARALYMPIC SPORTS RELEASE OF LIABILITY FORM

## **Release of Liability, Waiver of Claims, Assumption of Risks and Indemnity Agreement**

### **WARNING:**

**IF YOU SIGN THIS DOCUMENT YOU WILL BE WAIVING LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE FOR DAMAGE TO YOUR PROPERTY OR INJURY TO YOURSELF.**

### **PLEASE READ CAREFULLY.**

I, \_\_\_\_\_ (please print full name) of \_\_\_\_\_ (please print full address) am over the age of eighteen years, and I agree that, **IN CONSIDERATION OF THE PARALYMPIC SPORTS ASSOCIATION** allowing me to participate in programs, events and/or activities organized or conducted by or in any way associated with the Paralympic Sports Association, now or at any time in the future, which include, but are not limited to, recreational activities (such as dances and socials, bowling, wheelchair square dancing, cards and games, sleigh rides, skating, canoeing, wall climbing and mini golf) and sporting activities (such as floor hockey, archery, volleyball, sledge hockey, basketball, rugby, soccer and swimming) (the "Activities"),

**I AGREE** that for myself, my heirs, successors, executors, administrators, insurers and assigns:

1. **I RELEASE, INDEMNIFY, HOLD HARMLESS AND FOREVER DISCHARGE THE PARALYMPIC SPORTS ASSOCIATION**, its servants, directors, employees, officers, insurers, volunteers, coaches, instructors, agents and independent contractors, and their heirs, successors and assigns (the "Association"), from **any claims whatsoever** arising out of or in consequence of any loss, injury, or damage to my property or me, including death, incurred or suffered by me while attending at or participating in the Activities, even if such loss, injury or damage arises by reason of the **negligence of the Association** or any person attending at or participating in the Activities;
2. **I UNDERSTAND THE RISKS AND DANGERS** of attending at or participating in the Activities, including the risk of serious injury to myself or death, and **accept these risks and dangers**;
3. **I UNDERSTAND AND AGREE** that my attendance at or participation in the Activities is voluntary, and that **I do not have to sign this agreement** and can instead choose not to attend at or participate in the Activities; and
4. **I UNDERSTAND THAT** by signing this agreement I am also giving up any rights I might have to sue under any occupier's liability legislation in Alberta, including, but not limited to, the *Occupiers' Liability Act*, R.S.A. 2000, c.0-4.

Dated at the City of Edmonton, in the Province of Alberta, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature of Individual

\_\_\_\_\_  
Witness

**BY SIGNING THIS FORM I ACKNOWLEDGE THAT I HAVE READ IT THOROUGHLY  
AND THAT I UNDERSTAND ITS CONTENTS.**