

## SIMON FRASER STUDENT SOCIETY

### Release of Liability, Waiver of Claims, Assumptions of Risks, and Indemnity Agreement

Participant Name\* \_\_\_\_\_ SFU Student Number \_\_\_\_\_  
Participant Address\* \_\_\_\_\_ Province\* \_\_\_\_\_  
Postal Code\* \_\_\_\_\_ City\* \_\_\_\_\_ Telephone\* \_\_\_\_\_  
Email\* \_\_\_\_\_ Date of Birth (YYYY/MM/DD) \* \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Emergency Contact Name\* \_\_\_\_\_ Emergency Telephone\* \_\_\_\_\_

#### IDENTIFICATION

The Simon Fraser Student Society, their employees, stakeholders, Board of Directors, volunteers, contractors, clubs, student unions, servants, or other representatives are hereinafter in this agreement to be referred to as the "SFSS" or "Releasees".

Event: \_\_\_\_\_ Date of event: \_\_\_\_\_

#### EVENT DESCRIPTION OF RISKS

In consideration of my participation in this event and all related activities, I acknowledge that I am fully aware of the possible risks, dangers, and hazards associated with this event, including the possible risk of severe or fatal injury to myself or others.

#### RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

I am aware that all activities to take place in the event may involve risks, dangers, hazards and liabilities including but not limited to those referred to in the DESCRIPTION OF RISKS stated above. I freely accept and fully assume all such risks, dangers, and hazards including the possibility of personal bodily injury, death, property damage, or loss resulting therefrom.

#### In consideration of the SFSS having involvement with this event, I hereby agree as follows:

1. To waive any and all claims, whether in contract or in negligence, that I have or may in the future have against the SFSS as a result of my participation in the event;
2. To release the releasees from any and all legal liability for any loss, damage, injury or expense that I may suffer or that my next of kin may suffer as a result of my participation in the event due to any cause whatsoever, including breach of contract, or negligence on the part of the releasees;
3. To hold harmless and indemnify the releasees from any and all liability for any loss, damage, injury, or expense to any third party, resulting from my participation in the event;
4. Effective immediately I, for myself, my heirs, next of kin, executors, administrators and assigns, hereby release and hold harmless the SFSS in the event of my injury, incapacitation, or death, whether caused by the negligence of the releasees or otherwise.
5. I agree to become familiar with and abide by all established laws, boundaries, and rules particular to this event. I agree to comply with, without question, all staff and personnel assisting with the functioning of this event.

6. I hereby consent to receive medical treatment, which may be deemed necessary in the occurrence of injury, accident, and/or illness during the event. For the sake of clarity, any decision or act by any releasee to provide, request, or otherwise induce the provision of any medical treatment to me as a result of an injury, accident, or illness during the event shall be covered by this release.

#### **ACKNOWLEDGEMENT**

I confirm that I have read and understood this Agreement prior to signing it. I fully understand and assume all responsibility for the risks associated with the event. I am willingly and voluntarily participating in this event. I hereby declare that I knowingly assume all inherent risks of participating, and I forever take full responsibility for any and all damages, liabilities, losses, or expenses associated with the event.

I confirm that I am 19 years of age and older and I am signing, in agreeance with, this document on my own behalf. I have fully read and understood all policies and risks associated with this event.

**Signature:** \_\_\_\_\_ **Today's Date:** \_\_\_\_\_

**For participants under the age of 19:**

I hereby state that I am the legal parent or guardian of the underaged participant, \_\_\_\_\_, and that I am permitting the participant to engage in this event. I have fully read and understood all policies and risks associated with this event.

**Name:** \_\_\_\_\_ **Today's Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_