

# WAIVER

## uOTTAWA MINI ECO-MARATHON PARTICIPANT 2019

RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT (hereinafter referred to as the "Release Agreement").  
BY SIGNING THIS AGREEMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE OR CLAIM COMPENSATION FOLLOWING AN ACCIDENT  
**PLEASE READ CAREFULLY!**

INITIAL

**Participant's Name:** \_\_\_\_\_

In order to ensure visitors, including children, (to be known as the **Participant**) are aware of the risks and hazards present on campus, information is provided on health and safety concerns related to organized activities.

The activity concerned, **uOTTAWA MINI ECO-MARATHON** (to be known as the **Activity**), occurring at the **University of Ottawa** (**Location**) on **April 27, 2019**, **IS NOT MANDATORY** on the Participant's behalf.

The parent/guardian freely accepts and fully assumes all such risks, dangers, and hazards and the possibility of personal and bodily injury, death, property damage, or loss resulting from such risks, dangers and hazards. The **Participant** will be supervised at all times by a competent designated supervisor. The risks, dangers, and hazards may include but are not limited to:

- Exposure to hazardous materials
- Experimental processes
- Theft of Personal Items
- Weather
- Laboratory risks
- Equipment

By signing this document, the parent/guardian:

- Agrees to freely accept such risks, dangers and hazards inherent in undertaking the **Activity**.
- Agrees that the **Participant** must follow University procedures, and respect health and safety requirements on or off University property while participating in the **Activity**.
- Agrees that the **Participant** must not undertake any procedure, process, activity that was not discussed or reviewed with the **Activity** supervisor without first obtaining permission from the designated competent supervisor.
- Authorizes the University to take photographs and videos of the **Participant** for promotional purposes and authorizes the University and/or Actua to distribute this waiver to third parties who wish to use the media.
- Understands and fully accepts that if the **Participant** chooses to participate in any other activity that is not part of the planned **Activity**, that they are fully responsible for the consequences of their conduct.
- Understands that the University will not be responsible for administering any prescription medication to the **Participant**. (*This does not include any application of First Aid in an emergency situation, in which case, the responder will administer First Aid to the best of their abilities and information available to them, including any information provided on the Allergy Form, if applicable*).
- Understands and fully accepts that if the **Participant** fails to observe any conditions or rules established during the course of the **Activity**, that the **Participant** may be removed from the **Activity**.

**Please submit the original completed and signed form to the instructor on the first day of camp activity.**



**WAIVER**  
**uOTTAWA MINI ECO-MARATHON PARTICIPANT 2019**  
(CONTINUED)

**PARTICIPANTS UNDER 18 YEARS OF AGE**

**I CONSENT** to the Participant's presence at the Activity and **I ACCEPT AND FULLY ASSUME** all such (health and safety risks), dangers and hazards which may be associated with his or her participation.

**I AGREE TO WAIVE ANY AND ALL CLAIMS** that the **Participant** has or may have in the future have against the University of Ottawa, its respective Board of Governors, officers, directors, employees, agents, independent contractors, subcontractors, representatives, successors and assigns, and all instructors, coaches, managers, volunteers, sponsors, officials and officers in any way involved or connected with the Activity (herein after collectively referred to as the Releasees) arising out of the **Participant's** participation in the Activities and **TO RELEASE THE RELEASEES** from any and all liability for any loss, damage, expense or injury including death that the **Participant** may suffer or that his or her next of kin may suffer during the **Participant's** participation in the Activity, **DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, INCLUDING ANY DUTY OF CARE OWED UNDER THE OCCUPIERS LIABILITY ACT, ON THE PART OF THE RELEASEES AND ALSO INCLUDING THE FAILURE ON THE PART OF THE RELEASEES TO SAFEGUARD OR PROTECT THE PARTICIPANT FROM THE RISKS, DANGERS AND HAZARDS OF THE ACTIVITY REFERRED TO ABOVE.**

Upon the University's request, **I AGREE** to pick up the **Participant** should he or she fail to follow the University's rules, instructions or directions. **I the undersigned** declare that I am the parent or legal guardian of the **Participant** identified below. **I agree** to inform the **Participant** about the guidelines of this program and the University of Ottawa requirements.

**I HAVE BEEN GIVEN THE OPPORTUNITY AND HAVE BEEN ENCOURAGED TO SEEK INDEPENDENT LEGAL ADVICE PRIOR TO SIGNING THIS AGREEMENT.**

\_\_\_\_\_  
Print name of parent/legal guardian

\_\_\_\_\_  
Print name of Participant

\_\_\_\_\_  
Signature of parent/legal guardian

\_\_\_\_\_  
Date (MM/DD/YY)

\_\_\_\_\_  
Telephone number at work

\_\_\_\_\_  
Telephone at home/cellular phone

**IMPORTANT FOR ALL PARTICIPANTS**

\_\_\_\_\_  
Name of other emergency contact outside of University

\_\_\_\_\_  
Telephone number

**Employee responsible for the child while at the University of Ottawa**

I \_\_\_\_\_ am the person responsible for the **Participant** during the course of the Activity.

- I have informed the **Participant** on the matters set out in this waiver.
- I have informed the Dean or Director of the Activity
- I agree to notify the Dean or Director, Protection Services, and Office of Risk Management of any incident, conduct, and other matter relating to the participant's conduct during the Activity.
- I have ensured the participant has received the required health and safety orientation before the start of the Activity.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please submit the original completed and signed form to the instructor on the first day of camp activity.**