



Lighthouse Recreation

WAIVER OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

BY SIGNING THIS DOCUMENT, YOU WILL WAIVE CERTAIN LEGAL RIGHTS INCLUDING THE RIGHT TO SUE .

PLEASE READ CAREFULLY

INITIALS

THIS WAIVER IS FOR PARTICIPANTS OVER THE AGE OF 18

I, _____,
(Full Name)

Residing at _____,
(Home address)

Hereby acknowledge, understand and agree that:

I intend to participate in _____
(program name)

for the dates of _____
(please state the date/s you will participate- ex July xx-Auguat xx, 2020)

I understand that I cannot participate in the program unless and until I sign this **WAIVER OF LIABILITY and ASSUMPTION OF RISK AGREEMENT.**

RISKS AND HAZARDS: Participation in the program may expose me to many risks and hazards, some of which are foreseeable, some of which are not, some of which are inherent in the nature of the program, and some of which may rise from human error or negligence. These risks and hazards may include but are not limited to;

Falls to the ground or into water, collisions with other participants or equipment, misuse of equipment, variations in weather or temperature resulting in heatstroke, sunstroke or hypothermia, insect bites, exposure to wildlife, adverse plants such as stinging nettle or thorns, hazardous bystanders, impact, or injury,
And may result in serious physical injury even death, infections, and/or loss or destruction of property.

In consideration of the Lighthouse Community Center Society (LCCS) allowing me to participate in the program, I agree:

- To assume all risks arising out of, or associated with, or relating to my participation in the program even though such risks may have been caused by the negligence of the LCCS or it's agents;
- To be solely responsible for any injury, loss or damage which I might sustain while participating in the program even though such injury, loss or damage may have been caused by the negligence of the LCCS or it's agents;
- To release the LCCS and it's agents from liability for any and all claims, demands, actions, and costs which might arise out of my participation in the program even though such claims, demands, actions, and costs may have been caused by the negligence of the LCCS or it's agents.

I have carefully read and fully understand the terms of this **WAIVER OF LIABILITY and ASSUMPTION OF RISK AGREEMENT** and by signing it voluntarily, I am agreeing to it's terms. The **WAIVER OF LIABILITY and ASSUMPTION OF RISK AGREEMENT** is a legal document and is binding on me as well as upon my heirs, executors, representatives and assigns.

Signed at _____, BC, this _____ day of _____, 20_____.

Participant signature: _____

Participant Name: _____
(printed)

Witness signature: _____

Witness name: _____
(printed)