



FortWhyte Alive

HUMAN. NATURE.

Waiver and Release

Participant's Name: _____

Address: _____

City: _____ Prov: _____

Postal Code: _____ Telephone: _____

Age: _____

In consideration of the Participant being allowed to participate in a FortWhyte Alive Outdoor Adventure program, the Participant or if the Participant is under the age of 18, the Participant and Participant's parent or guardian, hereby release The FortWhyte Foundation Inc., and its trustees, directors, officers, servants, volunteers, representatives and agents from and against all claims, actions, demands, costs and expenses relating to injury, death, damage to person or property or loss of property, howsoever caused, arising out of or in connection with the Participant's presence at FortWhyte Alive and (or) participation in any FortWhyte Alive Outdoor Adventure Program.

This release shall be binding upon the undersigned and the estate(s) of the undersigned.

I have read and understood the above Release.

X _____

Signature of the participant

Date: _____

If the participant is under the age of 18, the following must be completed:

I _____ as parent/guardian of the participant, have read and understood the above Release

X _____

Signature of Parent/guardian

Date: _____



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