

## **RELEASE AND WAIVER OF LIABILITY AGREEMENT**

I, \_\_\_\_\_\_\_ acknowledge that I have voluntarily applied to participate in the Extend-a-Family Waterloo Region **Ball Hockey Tournament on September 24, 2016**.

I AM AWARE THAT THESE ACTIVITIES MAY BE HAZARDOUS, AND THAT I COULD BE SERIOUSLY INJURED. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN.

I agree that I will not hold **Extend-a-Family Waterloo Region**, its employees, agents or assigns, nor any sponsors for this event, responsible for any damages or bodily injury top me or others that may occur due to my participation in this activity.

I verify the above statements by placing my initials here: \_\_\_\_\_

Parent or Guardian's initials (if under 18): \_\_\_\_\_

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND EXTEND-A-FAMILY WATERLOO REGION, ITS EMPLOYEES, AGENTS OR ASSIGNS AND SPONSORS FOR THIS EVENT AND SIGN IT OF MY OWN FREE WILL.

**If signed by a parent or guardian:** I verify that the dangers of the activities and the significance of this Release and Waiver were explained to the Participant and that the Participant understood them.

 PARTICIPANT/RELEASOR
 PARENT OR GUARDIAN

 Signature
 Signature

 Date
 Name (Please Print)

IF YOU ARE UNDER 18 YEARS OF AGE, YOU AND YOUR PARENT OR GUARDIAN MUST SIGN AND INITIAL THIS FORM WHERE INDICATED.