

Participation in Soldier On Event- Waiver of Liability, Assumption of Risks, and Indemnification Agreement

Assumption of Risks:

100411	ption of Risks.
a.	I acknowledge that my attendance at or participation in the following physical activity or event:
	Reel, Kayaks & Real Heroes
	conducted at the following location:
	Petawawa Point Beach, Petawawa On
	carries with it certain inherent risks and dangers that cannot be eliminated regardless of the care taken to avoid injuries.
b.	I acknowledge that the inherent risks associated with this activity/event include, but are not limited to: Sprains, muscle strains, muscle tears, broken bones, contusions, concussions.
c.	I have read the foregoing and I understand the physical demands this activity/event presents and the inherent risks associated thereto and affirm that to the best of my knowledge, my physical condition is adequate for me to participate safely. My participation at this activity/event is voluntary and by signing below I knowingly and completely assume the foregoing risks.
In constant the co	of Liability: ideration of my participation in or attendance at this activity or event, l, on behalf of myself, personal representatives, pouse, children or assigns, do hereby waive, release and forever discharge Her Majesty the Queen in Right of Canada, Her s, servants, agents, employees and members of Her Canadian Forces, Staff of the Non-Public Funds and the Canadian Personnel Support Agency, its officers, servants, agents and employees, from and against all claims and demands, loss, lamages, actions, causes of action, suits or other proceedings by whomsoever made, brought, or prosecuted in a manner, to any loss, property damage, personal injury or death, resulting from, occasioned by or attributable in any way to my acts ssions resulting from my participation in or attendance at this activity/event.
I also hemploy Agency causes proper	diffication and Hold Harmless: dereby agree to indemnify and save harmless Her Majesty the Queen in Right of Canada, Her officers, servants, agents, wees and members of Her Canadian Forces, Staff of the Non-Public Funds and the Canadian Forces Personnel Support y, its officers, servants, agents and employees, from and against all claims and demands, loss, costs, damages, actions, of action, suits or other proceedings by whomsoever made, brought, or prosecuted in a manner, related to any loss, by damage, personal injury or death, resulting from, occasioned by or attributable in any way to my acts or omissions ag from my participation in or attendance at this activity/event.
I ackno inhere	wledgment and Understanding: owledge having read this assumption of risks, waiver of liability and indemnity agreement, including the description of the at risks associated with the activity or event and understand that this Agreement is intended to be broad and all-inclusive so reclude any claims and that I have the legal capacity to sign, or if I am a minor, have discussed fully with my parent or an.
Partici	pants signaturedatedate
Witnes	s (Soldier On Event Coordinator)datedate



Participant Information	
First	Emergency Contact:
Name:	Name:
Last	Phone Number:
Name:	Thone Number.
Address	Approval from Military Chain of Command
Address:	(SERVING MEMBERS ONLY):
	(SERVING MEMBERS ONE 1).
	() I APPROVE
	Comments:
City:	
Phone Number:	
Status: () SERVING / () RETIRED	
	Print Name:
Unit:	
Rank:	Rank:
Environment: () ARMY () NAVY () AIR FORCE	g'
Svc	Signature:
Number:	
WAG GILLANGE	
VAC Client Number:	Data
	Date: