



The Handi-Boat Society of Alberta Waiver Form

GROUP NAME: _____
ADDRESS: _____
CONTACT PERSON: _____
PHONE NUMBER: _____
DATE of VOYAGE: _____

WAIVER

In consideration of the Handi-Boat Society, agreeing to accept the undersigned as participant(s) in its alternative recreation program, for travel on its pontoon boat on the above date(s) [or alternate(s)] him/her or his/her legal guardian hereby agrees and covenants for him/herself and for his/her respective heirs, legal representatives and assigns to irrevocably bind him/herself from making claim or demand or to commence, cause or permit to be prosecuted any action in law or equity against The Handi-Boat Society of Alberta or any of its Directors, Employees, Sponsors, Servants, Agents or Subcontractors on account of any personal injury, failure to offer medical treatment, negligently applying medical treatment, disability, property damage, loss of services, expenses or any other damages of any kind that the below signed may sustain as a result of carriage on any craft of The Handi-Boat Society of Alberta.

Photographs/Video. Photographs or videos may be taken by a Handi-Boat representative for use on our website or for fund raising campaigns. If you do NOT consent to have a photo or video taken of yourself, please check the box.

PARTICIPANT NAME [print]

PARTICIPANT SIGNATURE

GUARDIAN NAME [print]

GUARDIAN SIGNATURE

Date: _____