

ASSUMPTION OF RISK & WAIVER AGREEMENT FOR MINORS UNDER THE AGE OF EIGHTEEN (18) YEARS

WARNING: BY SIGNING THIS FORM, YOU GIVE UP IMPORTANT LEGAL RIGHTS!
PLEASE READ CAREFULLY.

NAME:			
			the "Parent/Guardian"
NAME:			
			the "Child"
ADDRESS:			
TELEPHONE NO.(S):	(H)	(C)	
EMAIL ADDRESS:			
EMERGENCY CONTACT NO.:			
NAME OF EVENT:			the "Event"
DATE OF EVENT:			
LOCATION OF THE			
FVFNT:			

The below Parent/Guardian hereby certifies that he or she is the parent or legal guardian of the minor child participant ("Child"). As consideration for permitting the Child to participate in the Event, I agree as follows:

Risks: I understand and acknowledge that the Child's participation in the Event involves risks including, but not limited to, the following: risk of property damage and bodily injury, including, but not limited to, permanent disability, paralysis and possibly death. These risks may result from the Child's participation in the Event, from the Event itself, from the acts of the Child and/or others, from physical conditions of the Event, or from the unavailability of emergency medical care for any reason.

Assumption of Risks: I expressly and voluntarily consent and agree to assume full responsibility for any and all damages or injury that may arise out of or result from the Child's participation in the Event.

Release of Liability: I release, waive and forever discharge Northwestern Polytechnic ("NWP"), its affiliates, their governors, officers, employees, personnel, volunteers, and any of their staff members, instructors, agents or representatives ("Releasees"), from all liability to me, the Child, and our respective legal representatives, heirs and assigns and any person claiming through or under myself or the Child, of and from any and all present and future claims, demands, damages, actions, or rights of action, whether legal or in equity, arising from or by reason of any bodily injury or personal

The personal information requested on this form is collected under the authority the Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act. It will be used for the purpose of implementing this Agreement.

injuries known or unknown, death, loss or theft of personal property or property damage that may occur as a result of the Child's participation in the Event.

I further release, waive and forever discharge Releasees from all liability to me and the Child, and our respective legal representatives, heirs and assigns, of and from any and all present and future claims, demands, damages, actions, or rights of action, whether legal or in equity, arising from or by reason of any bodily injury or personal injuries known or unknown, death, loss or theft of personal property or property damage that may occur in, on or about NWP's premises or the premises of the Event, or as a result of the Child's participation in the Event.

Indemnification: I agree to indemnify and hold harmless the Releasees from and against all claims, demands, lawsuits, causes of action, liabilities, losses, costs (including reasonable legal fees) or damages for any property damage, property loss or theft, personal injury, death or other loss arising from or relating to the Child's participation in the Event.

Abide by Rules and Regulations: I agree to assist the Child to comply with and abide by all rules and regulations of GPRC in connection with the Event. Further, I have explained to the Child, the need to follow the rules and regulations.

Skills and Physical Ability: I acknowledge and represent that, to the best of my knowledge, the Child has the requisite skills, qualifications and physical ability to properly and safely participate in the Event.

Representatives: I enter into this Agreement for myself, the Child, my spouse (if any), my heirs, assigns and legal representatives and persons claiming through or under myself or the Child.

Medical Treatment: I, on behalf of the Child, hereby consent to NWP securing such medical advice and services as it, in its sole discretion, may deem necessary for the Child's health and safety and I shall be financially responsible for such advice and services. I further release the Releasees from any claim whatsoever on account of first aid treatment, medical services or other services rendered to the Child during his or her participation in the Event.

I HAVE READ AND FULLY UNDERSTAND THIS AGREEMENT AND RELEASE. I AM AWARE THAT IT RELATES TO SURRENDERING AND RELEASING VALUABLE LEGAL RIGHTS AND REMEDIES. BY SIGNING THIS RELEASE, I HEREBY FREELY AND VOLUNTARILY RELEASE THOSE LEGAL RIGHTS AND REMEDIES. I FURTHER UNDERSTAND THAT BY SIGNING THIS AGREEMENT I AM ACCEPTING FINANCIAL RESPONSIBILITY FOR ANY MEDICAL ASSISTANCE NWP MAY DEEM NECESSARY FOR MY CHILD'S HEALTH AND SAFETY AND ALSO FOR ANY DAMAGE TO THIRD PERSONS OR THEIR PROPERTY THAT MY CHILD MAY CAUSE.

Signed thisday of	, 20, at Grande Prairie/Fairview, Alberta.
Signature of Witness	Signature of Parent/Guardian
Printed Name of Witness	 Printed Name of Parent/Guardian

THIS AGREEMENT MUST BE COMPLETED IN FULL, SIGNED, DATED AND WITENSSED BEFORE THE CHILD MAY PARTICIPATE IN THIS EVENT.