ROPE SKIPPING CANADA RELEASE, WAIVER AND ASSUMPTION OF RISKS – 2019-2020

THIS IS A LEGAL DOCUMENT. BY SIGNING THIS DOCUMENT YOU AGREE TO WAIVE CERTAIN LEGAL RIGHTS INCLUDING THE RIGHT TO SUE ROPE SKIPPING CANADA.

	PL	EASE READ CAREFULLY!	
_	Initials		nitials
Name of Participant:			
Postal Code: Phone		City: Email:	Province:
Birthdate: (athletes only)	'	(yyyy/mm/dd) CLUB Name:	·
ASSUMPTION OF RISKS			
dangers and hazards includin falls, impact with other partic injury, tendon or muscle stra	g but not lim ipants or obje in or rupture	KIPPING CANADA activities and programited to: equipment failure, falls, collisted to: equipment failure, falls, collisted to: equipment failure, falls, collisted to: equipment failure, as here, bone fracture, urinary incontinence, reparticipants, instructors or coaches.	ions, slips and falls, trips and art attack, concussion or brain
I accept and fully assume all that may arise from my partic		angers and hazards and the possibility ese activities.	of personal injury and death
RELEASE OF LIABILITY, WAIVE	R OF CLAIMS	S AND INDEMNITY AGREEMENT	
In consideration of and exchaprograms, I agree:	ange for ROP	PE SKIPPING CANADA allowing my par	ticipation in its activities and
RELEASE them from any and	all liability o	ve or may have in the future against R or fault for any loss, damage, expense may suffer as a result of my participati	or personal injury, including
_		DUE TO ANY CAUSE OR REASON, INCL UTORY DUTY OF CARE OR OTHER DUT	
_	OTECT ME F	due to ANY FAILURE BY ROPE SKIPPING ROM THE RISKS, DANGERS AND HAZAF	
MEMBER RESPONSIBILITIES			
,		affiliated provincial Rope Skipping asso that is safe for Rope Skipping participati	
•	y RSC for pro	io recordings taken of the participant na omotional purposes, including but not li releases or livestreaming.	
Date			
Participant's Name		Witness' Name	

Witness' Signature

Participant's Signature

(Legal Guardian for Participant, if under age of 18)