



Program Participant Form

For use if not a Leduc Boat Club Member

Program Type:
 Youth
 Adult

Application Date: _____

Applicant Information

Full Name of Paddler		Date of Birth	Age	<input type="radio"/> Male <input type="radio"/> Female
Address	City	Prov	Postal Code	
Home Phone	Contact Phone	Email Address		
Medical Considerations: Please describe any medical conditions/history that staff or coaches should be made aware of. _____ _____				
Swimming Ability: Please describe your swimming abilities. _____				
Previous Paddling Experience Have you paddled/rowed before? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Which Sport? _____ and how many years? _____ How did you hear about LBC <input type="checkbox"/> Word of mouth <input type="checkbox"/> Advertisement <input type="checkbox"/> Walking by <input type="checkbox"/> Internet Site <input type="checkbox"/> Other _____				

Emergency Contact Information

Full Name of Contact			
Address (if different than above)	City	Prov	Postal Code
Home Phone	Work Phone	Relationship to Paddler	

Parental Contact Information

Full Name of Parent or Legal Guardian			
Address (if different than above)	City	Prov	Postal Code
Home Phone	Work Phone		

Paddling/Rowing activities by their nature involve certain elements of risk that involve potential for bodily injury. A portion of the program budget is allocated for accident insurance should injury occur. I acknowledge this element of risk and have read and understand the "Waiver of Liability and Release of Claims" (on the reverse side) and agree to permit myself/child to participate.

Printed Name of Applicant	Signature of Applicant
Printed Name of Parent/Guardian	Signature of Parent/Guardian
Printed Name of Witness	Signature of Witness

Waiver of Liability and Release of Claims

~Please Read Carefully~

BY SIGNING THIS, YOU GIVE UP ALL RIGHTS TO LITIGATION TO THE Telford Lake Alberta Training Centre Society, (TLATCS) Leduc Boat Club (LBC), Alberta Sprint Racing Canoe Association (ACRCA) and the City of Leduc.

I AGREE TO THIS WAIVER OF LIABILITY AND RELEASE OF CLAIMS in respect to the TLATCS, LBC & ASRCA, it's officers and directors, employees, guides, agents, volunteers, members or managers, contractors, foundations and the City of Leduc.

I understand that paddling on lakes; reservoirs and rivers involve certain dangers, not all of which can be listed here. Among the more obvious and frequent are:

1. Exposure to variable extremes in weather that may cause injury due to heat or cold, and which may prevent or force route and itinerary changes.
2. Contact with and possible immersion in cold water for undetermined periods, leading to hypothermia and possible suffocation.
3. Exposure to capsize and sinking, trees, rocks, bridge abutments, log jams, rope entanglement, current patterns and other possible sources of "in water" injury and entrapment.
4. Unfamiliar terrain and routes where water craft could become separated from the party.
5. Transport by public or private motor vehicles.
6. Travel in remote locations with poor communications and inability to get rescue or medical assistance easily or quickly.

I am not relying on any oral or written statements made by the TLATCS/LBC/ASRCA personnel and/or event organizers or managers and the above named organizations, foundations, or the City of Leduc, whether in brochure, advertisements or in individual conversation to lead me to become involved in this program on any basis other than the assumptions of the risks involved. I accept all of the risks and the possibility of death, personal injury, property damage and loss resulting from my involvement with the practice season and TLATCS/LBC/ASRCA events. I release the TLATCS/LBC/ASRCA, its officers and directors, employees, guides, agents, volunteers, members or managers, contractors, foundations and the City of Leduc, from any and all liability for any personal injury, death, property damage or loss that I, or my child or charge or organization may suffer as a result of my participation with TLATCS/LBC/ASRCA, it's officers and directors, employees, guides, agents, volunteers, members or managers, contractors, foundations and the City of Leduc, whether such a claim arises by contract, by tort, in equity or by reason of breach of a legal or statutory duty.

I certify that I am physically capable and fit to participate in this activity and have no medical conditions or needs that will cause me injury in the participation of paddling/rowing. I confirm that I am 18 years of age or older or where I am under 18 years of age, through my legal guardian I agree that I will pay for all costs incurred by the TLATCS/LBC/ASRCA, it's officers and directors, employees, guides, agents, volunteers, members or managers, contractors, foundations and the City of Leduc, should a suit be launched on behalf of my, my child or charge or organization. I confirm that I have read this waiver carefully before signing, and that I understand it, and that it will be binding, not only on me, but also on by heirs, next of kin, personal representatives and assigns. I acknowledge that the TLATCS/LBC/ASRCA personnel have been available to fully explain the various hazards and risks associated with activities of the TLATCS/LBC/ASRCA and those risks specially associates with the program in which I, or my child or charge or organization are involved. I agree that even though I, my child or charge or organization may not live in Alberta, the laws of the Province of Alberta and the City of Leduc by-laws govern this waiver of liability and release of claims and will be enforceable in any court.