



REGISTRATION FORM AND WAIVER

Today's Date ____/____/____
Month Day Year

Full Name of Participant		Birthdate: ____/____/____ Day Month Year	
Street Address			
City		Province	Postal Code
Cell Phone Number		Home Phone Number	Email Address
Emergency Contact Name		Emergency Contact Phone Number	

RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT. PLEASE READ AND SIGN BELOW.

To: **OVERhang Education Centre Ltd**, ("the Company") and its director, officers, employees, representatives and agents (collectively called "the Agents").

1. **I agree as precondition to my participation** in all events organized by "the Company" and/or "the Agents" including but not limited to indoor rock climbing (referred to as "the Activities") and in further consideration of "the Company" allowing me to do so, **that I will strictly be bound by the terms of this Release of Liability, Waiver of Claims, Assumption of Risk and Indemnity Agreement** ("the Agreement).
2. I acknowledge that "the Activities" **involve inherent risk and dangers that may cause serious injury and possible death to participants.**
3. **I fully understand the risks and dangers** associated with my participation in "the Activities" **and accept same entirely at my own risk.**
4. **I agree to abide by the rules and policies** outlined in my orientation and posted within the Company's facility.
5. **I hereby waive any and all claims** which I may have against "the Company" and "the Agents" and release "the Company" and "the Agents" from **all liability** for injury, death, property damage or any other loss sustained by me as a result of my participation in "the Activities", **due to any cause whatsoever, including negligence, breach of contract, or breach of any statutory or other duty of care** by "the Company" and/ or "the Agents".
6. I appreciate that "the Agreement" limits the liability of "the Agents" to the same extent as it limits the liability of "the Company", even though "the Agents" are not formal parties to "the Agreement".

I am 19 Years of age or older, and I have read and understand "the Agreement". I understand that this document contains a promise not to sue "the Company", and/or "the Agents" and that it constitutes a release of liability and an indemnity for all claims.

If I am the parent and/or guardian of the participant, I have understand and execute "the Agreement" on behalf of my child/ward.

SIGNATURE OF Parent/Guardian (if 18years or younger) _____

PRINT NAME OF PARENT/GUARDIAN (If applicable) _____

SIGNATURE OF PARTICIPANT _____

DATE _____