



**RELEASE OF CLAIMS AND WAIVER OF LIABILITY FORM
BETWEEN THE
OTTAWA RIVER CANOE CLUB AND**

Ottawa River Canoe Club

(Participant or Parent / Guardian of under 18 year old participant)

In respect of the following program(s):

- | | | | |
|--------------------------|-----------------------------|--------------------------|-----------------------|
| <input type="checkbox"/> | Dragon boat | <input type="checkbox"/> | Open House |
| <input type="checkbox"/> | Corporate dragon boat | <input type="checkbox"/> | One time trial |
| <input type="checkbox"/> | Recreational canoe or kayak | <input type="checkbox"/> | Small swell |
| <input type="checkbox"/> | Stand up paddling | <input type="checkbox"/> | Outrigger |
| <input type="checkbox"/> | Adaptive | <input type="checkbox"/> | Constance Bay DB fest |
| <input type="checkbox"/> | Other: _____ | | |

To be located at: *Sheila McKee Memorial Park 1610 Sixth Line Rd Ottawa, Ontario*
or alternate of: _____

On the date of: _____

As a participant or parent/guardian of a youth participant in the above-described program/activity, I fully understand, acknowledge and agree to the following:

- I am aware there may be inherent risks to participating in the above-described program/activity.
- I am aware that all participants must agree to abide by the rules and regulations, policies and procedures of the Ottawa River Canoe Club
- I am aware of the ORCC recommendation that all participants strive to achieve a competence level in swimming following the Red Cross Swim program (able to swim 75 metres and tread water for 2 minutes).
- I am aware that lifejackets must be worn for all on water activity by all U15 and under paddlers, dragon boat paddlers, and any participants who have not met the recommended swim competency level.
- I am fully aware and understand the risks involved with paddling in cold water conditions. I understand that a Government approved PFD must be worn while participating in on-water activities/programs during cold water conditions. I understand that if I paddle without wearing a Government approved PFD, I do so at my own risk and I assume all the responsibility for my actions.
- I am unaware of any health-related problems that could cause injury while engaging in the above-described program/activity. I have full knowledge of the nature and extent of the risks involving in participating in the above-described program/activity. I am voluntarily assuming the risks involved in my child participating in the above-described program/activity and in doing so I fully understand that I will be solely responsible for any injury, loss or damage that he/she causes or sustains.

In case of emergency, the following contact information must be provided:

Name: _____ Relationship: _____

Address: _____

Tel. No.: _____ (H) _____ (CELL)

Health concerns / alerts / allergies that the Ottawa River Canoe Club should be aware of:
