



Ticket No. # \_\_\_\_\_

## RELEASE OF LIABILITY, WAIVER OF ALL POSSIBLE CLAIMS AND ASSUMPTION OF RISK FORM

**Warning:** By Signing This You Are Waiving Your Legal Rights and You Give Up the Rights to sue Conestoga Students Inc.

**Participant Name Signing This Form:** \_\_\_\_\_

**Activity/Event:** \_\_\_\_\_

### To: Conestoga Students Inc.

I desire to participate in the above event/ activity sponsored or organized by Conestoga Students Inc. I understand that in order to participate in this Conestoga Students Inc. organized event/ activity, I must agree to be bound by this Release, Waiver and Assumption of Risk. (This form must also be signed by a parent or guardian if the participant is a minor.)

In consideration of Conestoga Students Inc.'s acceptance of this form, and my being permitted to participate in the above event/ activity, I must agree to this Release, Waiver and Assumption of Risk.

I waive any and all claims I may now and in the future have against, and release from all liability and agree not to sue Conestoga Student Inc. and its executives, employees, volunteers, agents or representatives (collectively its "staff"), for any personal injury, death and property damages, expenses or loss sustained by myself as a result of my participation in the above activity due to any cause whatsoever, including, without limitation, negligence, breach of statutory duty including duties arising from occupier's liability legislation, on the part of Conestoga Students Inc. or its staff.

I am aware that there are serious dangers and risks inherent in:

1. TRAVEL
2. WEATHER – Weather conditions may be extreme and can change rapidly without warning.
3. EQUIPEMENT – Any equipment used during an event or activity as an aid or safety measure may fail or break.

I accept all the inherent risks of the above activities and the possibility of personal injury, death, property damage or loss resulting therefrom. I agree that I will be fully responsible for all costs and expenses that may be incurred in providing any special services to myself, outside of regular services agreed to or provided by Conestoga Students Inc. in connection with the activity, and without limiting the generality of the foregoing, I agree to be responsible for and pay for all and any costs of special travel, medical attention or other special outlay for me personally, and to reimburse Conestoga Students Inc. and its staff for all costs of these services as may be incurred by them for my benefit or at my request.

In entering into this agreement, I am not relying on any oral, written or visual representation or statements made by Conestoga Students Inc. I confirm that I am the full age of majority or, in the alternative, I have indicated that I am the guardian of the minor participant named, and that I have read and understand this agreement prior to signing it and agree that this agreement will be binding upon myself (as a participant or guardian), my heirs, next of kin, executors, administrators and successors.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature (if applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date



Ticket No. # \_\_\_\_\_

## PUBLICATION CONSENT FORM

<b>Name:</b>	
<b>Program:</b>	
<b>Email:</b>	
<b>Telephone:</b>	
<b>Event:</b>	

Pursuant to section 39(2) of the Freedom of Information and Protection of Privacy Act, I, the undersigned, hereby consent to:

- the use of personal information obtained during this interview; and
- the use of any supplemental personal information pertaining to the initial interview and which may be needed by Conestoga Students Inc. at a later date; and
- the use of any photographs, videos, and/ or imaging taken by Conestoga Students Inc. personnel.

I understand that the above stated personal information may be used for promotional purposes which includes Conestoga Students Inc.'s website/publications/broadcasts and/or use by the public media when that media requires my information in connection with the printing/broadcasting of Conestoga Student Inc. related publicity.

The Legal authority for the collection of this information is the Ministry of Training, Colleges and Universities. This information is collected and used under the authority of the Ontario Colleges of Applied Arts and Technology Act, R.S.O. 2002, and regulations thereunder.

Questions about this collection should be directed to:

Zack Dodge  
Marketing and Events Manager  
Conestoga Students Inc.  
299 Doon Valley Drive  
Kitchener Ontario, N2G 4M4  
519-748-5131 ext.3588

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature  
(If participant is less than 18 years of age)

\_\_\_\_\_  
Date