



Edmonton Ultimate Players Association Amateur Athletic Waiver and Release of Liability

Event: Indoor Juniors Session – Commonwealth Rec Centre, Edmonton

Date: April 25, 2015

NAME OF PARTICIPANT: _____

ADDRESS: _____

CITY: _____ **PROVINCE:** _____ **POSTAL CODE:** _____

PHONE NUMBER: _____ **DATE OF BIRTH:** _____

EMERGENCY CONTACT NAME: _____

RELATIOHNSHIP: _____ **PHONE NUMBER:** _____

In consideration of being allowed to participate in any way in the Edmonton Ultimate Players Association (EUPA) athletic/sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that the risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and, I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately (in person, or via email if only available option); and, I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Edmonton Ultimate Players Association (EUPA), their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releases"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

ACKNOWLEDGMENT:

I acknowledge that I have read and understood the agreement, that I have signed the agreement voluntarily, and that this agreement is to be binding upon myself, my hires, executors and representatives.

Signed this _____ day of _____, 2015, in Edmonton, Alberta.

Signature of participant

Signature of parent/guardian

Printed name of participant

Printed name of parent/guardian

Signature of witness

Printed name of witness