



CLIMBING WALL WAIVER RELEASE AND INDEMNITY

THIS IS A LEGAL DOCUMENT. PLEASE READ THOROUGHLY

PARTICIPANT INFORMATION

Participant Full Name				Date of Birth	
Street Address		City		Phone	
Province		Postal Code		Email Address	
Emergency Contact Name				Emergency Contact Phone	

Please note that by signing this form, you relinquish your right to bring court action to be compensated for any injury or loss to yourself as well as the right of your personal representative to compensation for your death. This acknowledgement is valid for one year (365 days), after which, another waiver will need to be reviewed and acknowledged.

- I, the undersigned, understand and acknowledge that I am aware of the risks associated with or related to the use of the climbing wall (including the risk of severe or fatal injury), to myself, particulars of which include but are not limited to the following:
 - Injuries resulting from falling and impacting climbing wall faces or the ground, including an object or objects resting on the floor.
 - Injuries resulting from activities such as climbing, belaying, rappelling, rescue systems, and other rope techniques.
 - Injuries resulting from falling climbers or objects such as rope or climbing hardware.
 - Injuries resulting from the physical activity of the sport itself, including but not limited to neck and back strains, muscle strains, muscle pulls, tendon damage, ligament damage, as well as other typical athletic injuries or more serious injuries.
 - I voluntarily accept these physical risks.
- I understand that by signing this document, I, my successors, heirs, assigns, or personal representatives waive the right to sue or otherwise claim against the Bonnyville & District Centennial Centre or its employees, volunteers, officials, sponsors, directors, agents, coaches, instructors, or independent contractors for any loss or damage connected with any property loss or personal injury that I sustain while participating in or preparing for any program or activity of the Bonnyville & District Centennial Centre.



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3. I further agree to indemnify and save harmless the Bonnyville & District Centennial Centre employees, volunteers, officials, sponsors, directors, agents, coaches, instructors, or independent contractors from any and all actions, claims, demands, losses, or suits of any nature resulting from and arising from my participation in any program in the Bonnyville & District Centennial Centre or my use of its facilities; or from the participation of my infant child in any program in the Bonnyville & District Centennial Centre; or from that child's use of its facilities.
4. I understand that the activity of climbing must be carried out without the assistance of another climber on the wall. I also understand that tandem climbing or having children harnessed to me while climbing is strictly prohibited.

HELMET WAIVER FOR PARTICIPANTS OVER THE AGE OF 13 YEARS ONLY

5. It is strongly recommended that all climbers wear a helmet. I have been offered a protective helmet, which could prevent permanent brain damage in the event of an accident. Against the advice of the Bonnyville Centennial Centre Staff and the insurance company, I am refusing this critical safety precaution.

I acknowledge that I am of the full age of 18 years and that I have read and fully understand this agreement prior to signature.

IN WITNESS WHEREOF I have executed this document at the Town of Bonnyville, in the province of Alberta, on _____(date).

Signature of Participant or Parent/Guardian

PRINT NAME of Participant or Parent/Guardian