

Halton Region Conservation Authority

INDIVIDUAL WAIVER OF PUBLIC LIABILITY

WARNING!

THE SPORT OF ROCK CLIMBING , MOUNTAINEERING AND CAVING IS RECOGNIZED TO BE AN ACTIVITY IN WHICH A HIGH LEVEL OF RISK IN TERMS OF PERSONAL INJURY AND/OR DEATH IS INVOLVED. THE HALTON REGION CONSERVATION AUTHORITY ACCEPTS NO RESPONSIBILITY FOR ANY ACCIDENT, INJURY, DEATH OR LOSS OR DAMAGE TO PERSONAL PROPERTY RESULTING FROM THE USE OF ITS PROPERTY FOR SUCH ACTIVITIES, AND ANY PERSON OR GROUP OF PERSONS ENGAGING IN THESE ACTIVITIES DO SO AT THEIR OWN RISK.

IN CONSIDERATION OF THE HALTON REGION CONSERVATION AUTHORITY permitting me to utilize its property, THE UNDERSIGNED does, for himself or herself and his or her heirs, executors, administrators and personal representatives, hereby remise, release and forever discharge the HALTON REGION CONSERVATION AUTHORITY and its successors, assigns, staff and employees, from all manner of action, causes of action, suits, claims or demands of whatsoever nature or kind against the HALTON REGION CONSERVATION AUTHORITY or its successors, assigns, staff or employees which the undersigned, his or her heirs, executors, administrators or personal representatives had, now have or may hereafter have by reason of personal injury or death or loss or damage to property arising out of the participation of the undersigned in such activities or instructional programs at the:

RATTLESNAKE POINT CONSERVATION AREA

on _____
Date(s) of Activity

THE UNDERSIGNED, hereby acknowledges that as of the date hereof, he or she is eighteen (18) years of age or over, and has read and understands the above.

IN WITNESS WHEREOF, the undersigned has hereunto set his or her hand.

Signature of Participant or Parent/Legal Guardian

Participant's Name - PLEASE PRINT

Date

Name of Group