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RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT

WARNING: BY SIGNING THIS DOCUMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE.

PLEASE READ CAREFULLY!

NAME OF PARTICIPANT:
ADDRESS OF PARTICIPANT:
COURSE CODE & TITLE / ACTIVITY NAME: Bus Trip
COURSE / ACTIVITY DATE:

ASSUMPTION OF RISK

Participation in the activity(s) of **Bus Trip**, carries with it certain inherent risks. I am aware that, while participating in the activity(s), I may be exposed to any manner of harm, injury, illness, death or property damage resulting from such risks, including but not limited to the following:

General:

- Loss or damage of personal property by any means including, but not limited to, theft, vandalism, fire, water damage or other type of damage or loss during transport;
- Use, misuse, non-use and failure of any equipment including the bus;
- Travel by motor vehicle or bus, traffic accidents, poor road conditions, or any other risk encountered before, during or after the activity(s);
- Any manner of loss related to the possibility of being left without transportation if I do not show up at the bus at the specified time(s) and location(s) which are:
- Loss, damage, injury, illness, death or expense that I may, or that members of my household(s) may suffer, including the
 contraction of a Communicable Disease as a result of my participation in this Activity. Communicable Diseases include, but are
 not limited to, any disease that can be transmitted from one person to another including viruses, bacteria, parasites or other
 organisms.

DEPARTING FROM the University (Location):	at (Time):
RETURNING TO the University from (Location):	at (Time):

- **I understand**: That if I choose not to return on the bus I am responsible to inform the bus monitor personally. I will then be responsible for my own transportation home.
- I understand: That consumption of alcohol on the bus is not permitted. All alcohol will be confiscated.

I freely accept and fully assume all such risks, dangers and hazards and the possibility of personal injury, death, property damage or loss, resulting therefrom.

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in consideration ofpermitting my participation in the activity(s) of Bus Trip , I agree as follows:		
1.	TO WAIVE ANY AND ALL CLAIMS that I have or may have in the future against and its members, officers, employees, students, agents, volunteers and independent contractors (all of whom are hereinafter collectively referred to as "the Releasees");	
2.	TO RELEASE THE RELEASEES from any and all liability for any loss, damage, injury or expense that I may suffer, or that my next of kin may suffer as a result of my participation in the activity(s) of Bus Trip due to any cause whatsoever INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, INCLUDING ANY DUTY OF CARE OWED UNDER THE OCCUPIER'S LIABILITY ACT, RSA 2000 c. 0-4 AS AMENDED ON THE PART OF THE RELEASEES;	
	(Initial here that you have read paragraph 2.)	
3.	TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any damage to the property of, or personal injury to, any third party, resulting from my participation in the activity(s) of Bus Trip ; and	
4.	THAT if I am supplying my own equipment, I am responsible for ensuring that it is safe and well maintained and up to the requisite standards for the activity(s) in which I am participating. I understand that the Releasees accept no responsibility for any incidents or accidents occurring out of the use or misuse of my equipment. (Initial here that you have read paragraph 4.)	
5.	This agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives the event of my death or incapacity.	
6.	This Waiver shall be governed by and construed in accordance with the laws in force in the province of and the federal laws of Canada, as applicable. The courts of shall have exclusive jurisdiction over all claims, disputes and actions arising out of and related to the activity(s) of Bus Trip and this Waiver and the parties hereby attorn to the jurisdiction of	
	courts. tering into this Agreement, I am not relying upon any oral or written representations or statements made by the Releasees, other than is set forth in this Agreement.	
AND [NC]	ONFIRM THAT I AM 18 YEARS OF AGE OR OLDER, THAT I HAVE READ AND UNDERSTAND THIS AGREEMENT O THAT I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS, LUDING THE RIGHT TO SUE, WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND IGNS MAY HAVE AGAINST THE RELEASEES.	
Signe	ed thisday of	
SIGN	NATURE OF PARTICIPANT WITNESS SIGNATURE (Non Family Member)	
	WITNESS NAME (please print)	

This Agreement must be completed in full, without alteration, signed, dated and witnessed, and paragraphs 2 and 4 must be initialed before the participant may participate in the activity(s).