

## Run Club Registration

Thank you for your interest in our Summer 2024 Run Club. Please complete the form and waiver below and return your forms to the front desk of the Student Wellness Centre with your payment by the end of the day on Friday May 10. If you have any questions please don't hesitate to reach out to us.

Name:		
Email:		
Student	Staff (Member)	Non-Member
Price:		
	_	
Tax:	_	Paid
Total:	_	



## Statement of Risks, Assumption of Risks and Release of Claims

Please read the following carefully and sign in the space indicated. This Release is a pre-condition for participation in Run Club 2024, and unless agreed to and signed the reservation is not valid.

- 1. I know that outdoor recreational activities involve inherent risks, obstacles and hazards that are natural and man-made, which could cause me serious or fatal injury. Participation may be physically and emotionally demanding. I understand that this outing involves activities in all extremes of weather, sometimes far from any professional or medical services. I understand that rescues may take more than 24 hours and the importance of obtaining sufficient medical and accident insurance before participation in the activity.
- 2. I acknowledge that my safety is my personal responsibility and that my safety depends on my alertness and my use of good judgment. I understand that I can reduce risks by paying careful attention to the environment, my physical and emotional state, and the condition of all equipment, and by participating in those activities that are well within my mental and physical capabilities.
- 3. I acknowledge that the leaders cannot foresee all the risks and hazards associated with this outing. I have been encouraged to develop a questioning attitude and to ask the leaders to explain any decision with which I am uncomfortable.
- 4. I understand that the Fanshawe Student Wellness Centre and LIV Unlimited reserves the right, at any time, to refuse as a member of a trip or course any person who becomes a hazard to himself or herself or any other member of the group. I agree to adhere to safety and other rules stipulated by the Fanshawe Student Wellness Centre and LIV Unlimited and its agents.
- 5. I understand that, in response to unexpected changes in weather, water level or any other condition, the Fanshawe Student Wellness Centre and LIV Unlimited may alter the itinerary of this trip or event at any time, perhaps causing delays, without penalty.

## **Assumption of Risks**

I have read and understood the Statement of Risks above and the unnamed risks and conditions that are inherent in this activity. I elect to participate in this activity despite those risks and conditions.

## **Release of Claims**

Phone:

In consideration of my participation in a program of the Fanshawe Student Wellness Centre and LIV Unlimited, I release and forever discharge the Fanshawe Student Wellness Centre and LIV Unlimited, its directors, officers, servants, agents and employees and its or their successors (the Releases) from any liability for any injury, loss of life that might happen to me or damage or loss of property, however caused, notwithstanding that the same may have been contributed to or occasioned by the negligence of the Releases or any of them. I declare that this release is binding on me, my heirs, executors, administrators or assigns.

Name of the trip or program: Run Club 2024

am 18 years of age or older and certify that I have read the Statement of Risks, Assumption of Risks and Release of Claims and agree to the terms outlined.		
Signature:	Print Name:	
Witness:	Print Name:	
Date:		
Emergency Contact		
Name:		