

Kingston Fencing Club

Waiver

ALL PARTICIPANTS MUST SIGN A RELEASE, WAIVER AND INDEMNITY FORM

Release, Waiver and Indemnity

IN CONSIDERATION of my participation in the sport and art of fencing at 362 Division Street, Kingston Ontario, I, for myself, my heirs, executors, administrators, successors, assigns, and anyone entitled to claims, HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE the **Kingston Fencing Club**, its executive board of officers, , OF AND FROM ALL claims, demands, losses, damages, costs, expenses, suits, actions, cause of action, or other proceedings, whether in law or equity, in respect of death, injury, loss or damage to my person or property, HOWSOEVER CAUSED, arising or to arise by reason of my participation in the sport of fencing, whether as spectator, participant, competitor or otherwise, whether prior to, during or subsequent to the activity AND NOTWITHSTANDING that the same may have been contributed to or occasioned by the negligence of any of the aforesaid, I FURTHER HEREBY UNDERTAKE TO HOLD AND SAVE HARMLESS AND AGREE TO INDEMNIFY all of the aforesaid from and against any and all liability incurred by any or all of them arising as a result of, or in any way connected with my participation in the said activity of fencing.

BY SIGNING THIS DOCUMENT I ACKNOWLEDGE HAVING READ, UNDERSTOOD AND AGREED to the above RELEASE, WAIVER AND INDEMNITY. I WARRANT that I am physically fit to participate in the activity. I am solely responsible for any personal liability insurance.

PARTICIPANT:

Date, Name (printed), Signature

Signature (if under 18 years of age, parent or guardian must sign below)

Date, Name (printed), Signature

WITNESS:

Date, Name (printed), Signature

CONTACT TELEPHONE NUMBER _____