

WAMBO AMBASSADOR Participant/Volunteer Waiver Form (2018)

Acknowledgement of Risk

I have entered this special event of my own free will. I hereby acknowledge that I fully understand and accept that risks and dangers exist in any special event or physical activity. These dangers could result in, but are not limited to, death, fractures, sprains, illness or injuries, injuries caused by the forces of nature, injuries involving travel by automobile or other conveyances, and /or loss of personal property

I am in good health and good physical condition, and have no medical problems that would affect my ability to participate in these activities.

I agree to accept all risks of participation, notwithstanding that I am or may be pregnant. I also accept all risks of participation even if I have a pre-existing medical condition (whether disclosed or not to any person), or a pre-existing medical condition of which I am not aware.

Liability Release

I hereby acknowledge that I have read and fully understand the Acknowledgement of Risk. I have and do hereby assume all of the above risks and will indemnify and hold the WAMBO, and its board of directors, volunteers, sponsors, agents or associates harmless forever from any and all liability, actions, causes of action, claims and demands of every kind and nature whatsoever which I now have or which may arise out of or in connection with my participation in this event or any activity arranged for me by WAMBO. The terms hereof shall serve as a release and assumption of risk by me for all claims which may be brought at any time by any person, including my heirs, executors and administrators and for all members of my family.

Publicity Release

Photographs and videotapes will be taken during this event and may be used in WAMBO promotional materials (website, media releases, brochures etc.) at any time after acceptance of this ambassadorship, and to promote this event in the future. I consent to the collection, use and retention of my personal information (or my child's/ward's or family's) including name, address, and any photographic, audio or video image of me (or my child's/ward's or family's) and grant to WAMBO the right to use such personal information or images in promotional materials at any time without compensation.

I am 19 years of age or older – *continue to signature section below.*

Permission Waiver

This signature is our waiver and release signature on behalf of the individual participant(s) or volunteer(s) named here who are less than 19 years of age. I am the parent, guardian or authorized authority with signature responsibility.

I, (please print name in full) _____

agree to be bound on behalf of the named participant(s) or volunteer(s) by the Acknowledgement of Risk, the Liability Release, the Publicity Release and all applicable rules concerning this event. I have read, understand and agree with the terms and conditions noted.

Authorized Adult Signature

Witness Signature

Date

For Participants and Volunteers 19 years and older:

Participant's Signature

Volunteer's Signature

Witness Signature

Date

WAMBO's Pledge of Confidentiality

Special Events Notwithstanding the event-related publicity and candid photos one can usually expect from participation in such a fun activity, WAMBO confirms our respect for your privacy. We protect your personal information and adhere to all legislative requirements with respect to privacy. We do not rent, sell, or trade mailing lists. We use your personal information to promote the event, to provide you with services, and to keep you informed and up to date on the activities of WAMBO. Contact from us could include program and service information, future special event notices, opportunities to volunteer. If at any time you have questions or wish to be removed from the list simply contact us by e-mail at waiver@wambo.ca