

RISK ACKNOWLEDGEMENT AND WAIVER OF LIABILITY

Ontario Skills Camp – Conestoga College, Brantford Campus

Address: 175 Aviation Avenue, Brantford, ON N3T 5L7

Date: July 8, 2024 – July 12, 2024

ASSUMPTION OF RISK

I acknowledge that participation in the Ontario Skills Camp involves many risks, dangers, and hazards, including risks dangers and hazards relating to exposure to biological agents, equipment failure, weather and environmental conditions, travel on campus and on public roads, and risks related to participant experience and abilities.

I AM AWARE OF THE RISKS, DANGERS AND HAZARDS ASSOCIATED WITH PARTICIPATION IN THE ONTARIO SKILLS CAMP AND I FREELY AND FULLY ASSUME ALL SUCH RISKS, DANGERS AND HAZARDS AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, PROPERTY DAMAGE OR LOSS RESULTING THEREFROM.

WAIVER OF LIABILITY

In consideration of The Conestoga College Institute of Technology & Advanced Learning (the “College”) allowing me to the Ontario Skills Camp, I acknowledge and agree as follows:

1. **TO WAIVE ANY AND ALL CLAIMS**, demands, lawsuits, costs, and expenses (including legal fees and disbursements) that I have or may have in the future against the College and its governors, officers, employees, students, agents, volunteers and independent contractors (all of whom are collectively referred to as “the Releasees”) and that relate in any way to my access, use or participation in the Ontario Skills Camp.
2. **TO RELEASE AND FOREVER DISCHARGE THE RELEASEES** from any liability for any personal injury, death, damage or loss resulting from my access to, use of or participation in the activities of the Ontario Skills Camp, including but not limited to liability for NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF STATUTORY DUTY or breach of any other duty imposed on the Releasees by common law, governmental order or statute, and further including ANY failure on the part of the Releasees to take all reasonable steps to safeguard or protect me from risks, dangers and hazards of my access, use or participation.
3. I am not relying on any oral or written representations or statements made by the Releasees with respect to the risk of participation in the Ontario Skills Camp other than what is set forth in this document. The College has advised me to obtain independent legal advice prior to signing this document and I have been given adequate time to do so.

Participant Name

PARENTAL ACCEPTANCE REQUIRED FOR ALL PARTICIPANTS UNDER THE AGE OF 18: I am the parent or guardian of the participant, who is a minor. I have read the agreement and understand that it includes a full and final waiver and release from any claims for loss or damage that the Minor may suffer. I consent to the Minor's participation and approve all of the terms of the agreement on the Minor's behalf. I agree to indemnify the College, its agents, servants, and employees from any claims that might be made against them by or on behalf of the Minor.

Parent/guardian name (print)

Phone number

Signature

Date