

RELEASE AND INDEMNIFICATION

WHEREAS I, as parent and legal guardian for my child, _____, wish for my child to participate in certain activities comprising the Bison I.D. Camp during the period of _____ to _____, 20__ (hereinafter, referred to as the "Activities");

IN CONSIDERATION of the University of Manitoba (the "University") arranging for my child to have the opportunity to participate in the Activities at the University:

1. I ACKNOWLEDGE and agree as follows:
 - (a) I am familiar with, and understand the rules governing, the Activities and I shall ensure that my child is also familiar with, and understands the rules governing, the Activities;
 - (b) prior to allowing my child to participate in the Activities, I will inspect the mats, equipment, facilities and if I believe anything is unsafe or beyond my child's capability, I will immediately advise the coach or supervisor of such conditions and refuse to allow my child to participate.
2. I FURTHER ACKNOWLEDGE that there are potential risks associated with my child participating in the Activities, including, but not limited to:
 - (a) Bodily-injury risks and personal safety risks; and
 - (b) Miscellaneous risks that would result from the Activities and which might not be foreseeable to me or my child at this time.
3. (a) I AGREE TO ALLOW my child to participate in the Activities notwithstanding the above-stated risks;
 - (b) I FURTHER AGREE TO ASSUME ALL RELATED HEALTH RISKS to my child of participating in the said Activities.
4. I, as parent and legal guardian for my child, on behalf of my child and my child's heirs, executors, administrators, successors and assigns, RELEASE the University, its respective servants, agents or employees from any claims for personal injury (including death), damages, losses or other proceedings while my child is engaged in the Activities or thereafter.
5. I, on behalf of my child, FURTHER AGREE TO INDEMNIFY the University, its servants, agents or employees from any damages which may result or claims or demands which may be made against the University arising out of or in consequence of the Activities and/or my child's actions.

- 6. I FURTHER STATE that I am of lawful age and legally competent to sign this Release, and that I am the parent or legal guardian of my child and may sign on my child's behalf.
- 7. The executed Release may be delivered by facsimile transmission and shall be deemed an original.

In signing this Release, I am not relying upon any oral or written representations or statements made by the University other than what is set forth in this Release.

I HAVE READ AND UNDERSTOOD THIS RELEASE AND I AM AWARE THAT BY SIGNING THIS RELEASE I AM WAIVING CERTAIN LEGAL RIGHTS WHICH MY CHILD OR MY CHILD'S HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNS MAY HAVE AGAINST THE UNIVERSITY.

IN WITNESS WHEREOF I have set my hand on the date set out below.

Witness

Signature

Date: _____

Please print your name here: _____