

**EVERGREEN SENIORS OUTDOOR CLUB
WAIVER OF LIABILITY**

Guests: You must return this waiver before your first outing.

You can fill it in on line and then download to your computer, or alternatively you can download the form to your device, and then fill it in, and save it.

After downloading the form can also be printed out, filled and scanned or photographed. In any case please return the filled in form via email to evergreenseniorscalgary@gmail.com.

PLEASE read the following before filling in the form.

In consideration of participating in any way in the Evergreen Seniors Outdoor Club events and activities the undersigned acknowledges, appreciates, and agrees that:

I am aware that **RISKS & DANGERS** are involved and that it is a condition of participation in any recreational, wilderness or other activity, including hiking, skiing, snowshoeing, walking and transportation organized by the directors, leaders, and/or members of, and on behalf of, the **EVERGREEN SENIORS OUTDOOR CLUB**.

I participate at my **SOLE RISK** and on behalf of myself, my heirs, executors, administrators and assigns, do hereby **RELEASE, IDEMNIFY and HOLD HARMLESS the, EVERGREEN SENIORS OUTDOOR CLUB**, its directors, leaders and/or members jointly and severally, from and against any loss or damage, injury, permanent disability, death, rescue cost, ambulance services and/or other expenses or costs caused to me or on my behalf, including through negligence, resulting from, or in conjunction with participation in any Evergreen Seniors Outdoor Club activities.

This waiver applies to all activities sponsored by the Evergreen Seniors Outdoor Club activities.

I HAVE READ THIS WAIVER OF LIABILITY AND I FULLY UNDERSTAND AND ACCEPT ITS TERMS, AS INDICATED BY MY NAME AND INFORMATION ON THIS FORM DONE VOLUNTARILY WITHOUT ANY INDUCEMENT.

Date* _____

Name* _____

Email* _____

Phone* _____

Guest Emergency Contact and Park Pass Information

The emergency contact information will be kept confidential.

Your Name: _____

Emergency Contact: _____

Relationship: _____ **Phone:** _____

If you have a park pass, please fill in. Once we have the information on file you do not need to carry your park pass on the bus.

National Park Pass Information (Optional). Park Pass Type: _____

Expiry Date (Month/Year) _____ Pass #: _____

Need help filling the form.

Here is a picture showing where the data is on the front of the pass.



Please fill in your own park pass.

In this example

Expiry Date – Month/Year -03/21

Pass# (underneath expiry date) 03-1002163

Type: F/G (family) you may have a seniors pass.