

Kayaking - Release, Waiver, and Indemnification Agreement (for ADULTS 18+)

Town / Municipality: Municipality of Lorne

Facility: St Léon Interpretive Centre

Activity: Kayak rental

Date(s) of Activity: _____ (please enter dates of visit here)

THIS FORM MUST BE READ AND SIGNED BY ALL ADULTS WHO WISH TO PARTICIPATE.

ELEMENTS OF RISK: Participation in recreational and water-based activities involves inherent risks, including but not limited to:

- Scrapes, cuts, bruises
- Strains, sprains, pulled muscles or ligaments, fractures or broken bones
- Drowning or near-drowning
- Hypothermia or cold-water shock
- Damage to personal property

Additional risks may arise from weather, water conditions, wildlife, or equipment failure.

There is no lifeguard on site. A properly fitted life vest (PFD) must be worn at all times while on or near the water.

ASSUMPTION OF RISK: I understand and accept the risks listed above. I acknowledge that these risks may occur without fault of the Municipality, the Organizing Committee, its employees, volunteers, or agents. I understand that no accidental death, disability, medical, or property insurance is provided for participants.

RELEASE AND INDEMNIFICATION : I release the Municipality, the Organizing Committee, and their employees, volunteers, and agents from all liability for injury, loss, damage, or death arising from my participation, regardless of cause. I agree to indemnify and hold them harmless from any claims or costs arising from my participation or my actions.

This includes any actual or alleged loss, injury, illness, or death connected to a Communicable Disease, defined as any illness transmitted directly or indirectly through air, surfaces, bodily fluids, or environmental exposure caused by viruses, bacteria, parasites, or other organisms.

FINAL ACKNOWLEDGEMENT: I have read and understand this agreement. I acknowledge that I am voluntarily assuming all risks associated with the Activity and that no insurance coverage is provided for participants.

Name of Participant (print): _____

Signature: _____

Date: _____