

RELEASE OF LIABILITY, WAIVER AND ASSUMPTION OF ALL RISKS

[Glenbrook Ravine Restoration Activities 2024]

PLEASE READ CAREFULLY

TO: City of New Westminster

I wish to undertake in <u>Glenbrook Ravine Restoration Activities 2024</u> and acknowledge that in order to do so, I must agree to be bound by this Release of Liability, Waiver and Assumption of Risk.

I understand and acknowledge the risks and hazards of <u>Glenbrook Ravine Restoration Activities</u> <u>2024</u> and agree to undertake <u>Glenbrook Ravine Restoration Activities 2024</u> at my own risk. I am aware that I MUST disclose any MEDICAL conditions that could affect my health during my participation in the aforementioned activity.

I hereby waive any and all claims that I may now and in the future have against, and release from all liability and agree not to sue The Corporation of the City of New Westminster and its respective agents, officers, employees, volunteers, contractors or elected representatives, (collectively, the "Released Parties") for any loss, damage, personal or bodily INJURY, or DEATH sustained or suffered by me as a result of my participating in <u>Glenbrook Ravine Restoration Activities 2024</u> due to any cause whatsoever, including without limitation, negligence, fault or breach of statutory duty, including duties arising from *Occupiers Liability Act*.

I confirm that I am the age of majority and that I have read and understand this agreement prior to signing it and agree that this agreement will be binding upon me (as participant or guardian), my heirs, executors and administrators.

Signed this day o	of, 2024 at _	,	British Columbia.
Participant's signature		Participant's Printed Na	me



PARENTAL CONSENT (PARTICIPANT IS UNDER 19 YEARS)

RELEASE OF LIABILITY, WAIVER AND ASSUMPTION OF ALL RISKS

[Glenbrook Ravine Restoration Activities 2024]

PLEASE READ CAREFULLY

TO:	City of New Westminster			
I allow my <u>Activities</u> Liability, V	child, [to undertake in <u>Glenbrook Ravine Restoration</u> so, I must agree to be bound by this Release of		
<u>2024</u> and assume fu	agree to allow my child to undertake <u>Glean</u> all responsibility for my child's participation	ds of <u>Glenbrook Ravine Restoration Activities</u> <u>nbrook Ravine Restoration Activities 2024</u> and I n. I am aware that I MUST disclose any MEDICAL his/her participation in the aforementioned		
liability an agents, of "Released my child a cause wh	d agree not to sue The Corporation of the ficers, employees, volunteers, contractors d Parties") for any loss, damage, personal as a result of participating in <u>Glenbrook Ra</u>	nd in the future have against, and release from all e City of New Westminster and its respective s or elected representatives (collectively, the or bodily injury, or death sustained or suffered by avine Restoration Activities 2024 due to any ligence, fault or breach of statutory duty, including		
I confirm that I am the age of majority and that I have read and understand this agreement prior to signing it and fully understand that by signing it, I am affecting the legal rights of my child, myself, my heirs, executors and administrators.				
Signed th	isday of, 2024 at	, British Columbia.		
Parent or	Guardian's Printed Name	Parent or Guardian's Signature		
				