Adult Waiver and Release Form

(To be completed by **Non-Chaperone Adults Attending Student Off-Site Activity**)

720 E 008

WHEREAS the undersigned _____ (hereinafter referred to as "**The Releasor")** wishes to attend, in his or her personal capacity only, and not as an agent of the Board of Trustees of Medicine Hat Public School Division and/or Medicine Hat Public School Division (hereinafter referred to as "MHPSD" – **"The Releasee")** on the student field trip described in Schedule "A" ("the Trip") sponsored by MHPSD;

AND WHEREAS the Releasor understands that there are risks to the Releasor associated with participation in the Trip, that may include, but are not limited to the risk of injury to or death of persons, and may also include loss of or damage to property, which risks may be dependent upon the nature of the Trip;

AND WHEREAS the Releasor agrees to voluntarily accept all risks that are associated with both the Trip and attendance at, and travel to and from the location at which the Trip is to take place, for himself/herself;

AND WHEREAS the Releasor has as a condition of being permitted to attend on the Trip agreed to execute this Waiver and Release;

NOW THEREFORE in consideration of the attendance of the Releasor on the Trip, the sufficiency of which consideration is agreed to, the Releasor does hereby, for himself/herself voluntarily assume all risks of every nature and kind, whether foreseeable or not, associated with participation in the Trip and attendance at, and travel to and from, the location at which the Trip is to take place, and hereby releases and forever discharges The Board of Trustees of MHPSD and/or MHPSD and its servants, agents, employees, elected officials and insurers, together called the MHPSD - Releasees, and their respective successors, assigns, heirs, and personal representatives, of and from any liability in respect of any demand, claim, action or proceeding of any kind, in law or in equity, or under any contract, or statute, which the Releasor, now has, ever had, or can, shall or may have, in the future, arising from, or relating to participation of the Releasor in the Trip or attendance of the Releasor at, and travel to and from, the location at which the Trip is to take place.

The Releasor further agrees, in consideration of the attendance of the Releasor on the Trip that:

1. The Releasor will not bring any action against any of the MHPSD Releasees; and
2. The Releasor will not permit any person to bring any subrogated action against MHPSD (the Releasees), or any of them; and
3. The Releasor will indemnify the MHPSD – Releasees in respect of all costs of every nature in the event that any person brings any action against them, jointly or severally, if the action relates to, or depends in any way, directly or indirectly, upon attendance of the Releasor on the Trip, or travel to and from the location at which the location at which the Trip takes place; or attendance at the location; and
4. The Releasor will execute such other documents as the MHPSD – Releasees, or any of them, may require to give full effect to this Waiver and Release; and
5. The Releasor will comply with the directions of the designated supervisors of trip, and will not interfere in any way with the supervision of the Trip by the designated supervisors.

The Releasor agrees that he/she has signed this Waiver and Release freely and voluntarily.

DATED this _____ day of _____, _____ at Medicine Hat in the Province of Alberta.

Releasor Signature	Witness Signature
(Print Name)	(Print Name)

SCHEDULE "A"

Name of Trip: _____

Name of Individual (Releasor): _____

Individual's address: _____

_____ Postal Code: _____

Individual's Telephone: Home: _____ Work: _____

List any conditions that might affect participation:

_____

_____

_____

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