



Acknowledgement and Waiver

As a participant in a dryland camp organized and operated by the Alberta Amateur Speed Skating Association in the 2018-19 season:

I acknowledge that recreational activities and athletic training generally and particular types of activity, sport or training in particular carries many risks of minor and severe personal injury, including death, as a result of many things, including bus travel, cycling, hiking, exercising, the vagaries of road and trail conditions and traffic, and the presence of other cyclists on the road or trail, and the risk of contact and collision with others, and the strain on one's body from strenuous physical activity; I further acknowledge that risk of injury is higher than in regular day-to-day living;

I have personal responsibility to ensure that I take all appropriate care and caution in training and activities to avoid or minimize the risk of injury to myself and to others and to monitor and moderate my activities to avoid injury or death to myself or others;

I have personal responsibility to deal with any health or medical conditions from which I suffer, whether known or unknown, and I rely upon no other participant, coach, leader, manager or organizer, to attend to or deal with any such health or medical condition.

I understand that I am obliged to follow all instructions, rules and regulations set by the organizers of the dryland camp and to follow the rules applicable to hikers and cyclists in the Province of Alberta and have the responsibility of adhering to those instructions, rules and regulations;

In consideration of me being permitted to attend and participate in this dryland camp I assume all risks of participating in the dryland camp, including its recreational and athletic activities, and on my own behalf I waive or release any rights and claims I may have against the Alberta Amateur Speed Skating Association, its employees and volunteers, in respect of any injury or loss suffered by me in or as a result of any aspect or element of the dryland camp caused in whole or in part by the negligence or other conduct of that organization or those individuals; and



I acknowledge that I have read this Acknowledgment and Waiver and understand that signing this Acknowledgement and Waiver affects my legal rights and entitlements in the event of any injury or loss.

Name of Participant (Please Print): _____

Signature of Participant: _____

Date: _____

AB Health Care Number: _____