

Comox District Mountaineering Club

Activity Register & Liability & Indemnity Waiver

Activity

Date of Activity **Leader**

I, the undersigned activity participant, acknowledge that I am in good health that I am participating in the activity named above on my own volition.

I further acknowledge that the following factors can cause or contribute to the inherent risks hazards of this activity:

- poor or inadequate physical fitness;
- inappropriate or inadequate clothing or equipment;
- failure to exercise good judgment or to pay due care attention.

I agree to assume all such risks hazards, to bear all costs of rescue medical treatment rendered to me or for my benefit, arising from the above named activity.

I further agree to stay with the group to follow the leader's instructions while participating in the above named activity.

I hereby absolve hold blameless the Comox District Mountaineering Club, its executive directors the volunteer leaders, from all liability indemnity for any injury or death incurred by me, or any damage or loss of my equipment resulting from the above named activity.

	Name of Activity Participant (please print)	Signature of Activity Participant, having read and agreed to the above terms	Date	Phone number of close friend or relative	CDMC Member? Y or N
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Note to leaders: please send completed waiver forms to the CDMC secretary upon completion of the activity.

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	Name of Activity Participant (please print)	Signature of Activity Participant, having read and agreed to the above terms	Date	Phone number of close friend or relative	CDMC Member? Y or N
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