



## HALTON GUJARATI SENIOR SAMAJ

Milton, Ontario

### ASSUMPTION OF RESPONSIBILITY, RISKS AND LIABILITY WAIVER MEMBERS AND PARTICIPANTS

BY SIGNING THIS LEGAL DOCUMENT AND BY BECOMING THE MEMBER AND OR PARTICIPANTS, YOU WILL BE GIVING UP CERTAIN LEGAL RIGHTS INCLUDING THE RIGHT TO SUE.

#### PLEASE READ CAREFULLY:

GENERAL WAIVER FOR ALL MEMBERS AND PARTICIPANTS FOR MEETINGS, TRIPS EXCURSIONS, FUNCTIONS, PICNICS, REFRESHMENTS AND OR FOOD SEVED OR ORGANIZED ANY KIND OF EVENT BY THE ABOVE-MENTIONED HALTON GUJATATI SENIORS SAMAJ, MILTON, ONTARIO, CANADA. (Referred as "HGSS")

I the undersigned, \_\_\_\_\_ duly sign and freely and voluntarily accept and assume all risks, dangers, and hazards including the possibility of personal injury, sickness, deaths, violence, property damage or loss during and / or after -effect from organized any functions trips, picnics, etc., or any other kind of events.

By signing this waiver, I accept my responsibility to abide by the laws of the country in which the event takes place, to have an adequate medical coverage, to protect personal possessions and to obey all the rules set out for particular event.

**LIABILITY WAIVER AND INDEMNIFICATION** In consideration of approval to participate in any event, myself and my any personal representatives, heirs, etc., hereby waive, release and hold harmless from any rights relating to, and release, forever discharge Halton Gujarati Seniors Samaj, its directors, Committee members & Volunteers from any all liabilities, including without limitation any actions, causes of actions, negligence, claims, and demands for damages, or loss or injury, resulting from or arising out of my participation in the programs being held regularly, field trips, transit in any facilities, or at any location where an activity is being held. Also, I agree to indemnify and save harmless HGSS and from any and all actions causes of actions, demands, expenses or losses, whatever which it may bear as a result of my negligence or willful act during participation in any event, by any reason of damage to any and all property and any personal injuries, including death of others or myself.

The contents and the reason of signing of this waiver has been read to me and also explained to me verbally in GUJARATI Language.

Signature of Member/Participant: \_\_\_\_\_

Signature of Witness: \_\_\_\_\_

Date: \_\_\_\_\_ Phone No. \_\_\_\_\_