

COMOX VALLEY NEWCOMERS' CLUB WAIVER AGREEMENT

Please read this document carefully before signing.

When signed, this document releases the COMOX VALLEY NEWCOMERS CLUB (CVNC) and related parties from all legal responsibility for injury, damage, or loss that may occur in connection with your participation in any activity organized by the CVNC.

I, _____(Name) (*Please print*)

of _____(Address)

_____ (Home) _____ (Cell) (Phone numbers)

_____ (Email)

the undersigned recognize that the CVNC is a volunteer organization whose purpose is to welcome new residents to the Comox Valley and to promote a friendly, social interaction amongst its members. I understand that my participation in CVNC activities is conducted at my own risk.

I am also aware that my participation in the activities may put me at an elevated risk of contracting or being exposed to viruses, contagious diseases, including but not limited to Covid-19, or other illnesses that may be present in the general population and/or in public spaces and that I nevertheless choose to participate in the activities and fully assume the risk of doing so. I have read and agree to abide by the Newcomers Club Safety Plan.

I hereby release CVNC, its officers, executive members, organizers, volunteers and all others from responsibility or liability for any losses, prejudice, injury, or loss of life that I may incur while participating in, or that are in any way connected to my participation in any CVNC activity, including those caused by the negligent act or omission of any of the above-named individuals or others acting on their behalf.

SIGNED on this _____ day of _____ (month), 20_____

Participant's Signature _____

(Participant must be 19 years of age or older)

Witness Signature _____

(Witness must be 19 years of age or older and unrelated)

(Witness print name)