# **Windsor Essex County Canoe Club**

P.O. Box 32022, RPO Riverside, Windsor, ON, N8S 4T8

## 2022 Membership Agreement (rev1)

WARNING! Please read carefully! By signing this document, you will waive certain legal rights - including the right to sue

- 1. This is a binding legal agreement. Clarify any questions or concerns before signing. This agreement is executed by an individual who is 18 years old as the primary member.
- 2. ORGANIZATION: In this Agreement, the "Organization" includes includes "Windsor Essex County Canoe Club," its directors, officers, members, employees, volunteers, contractors, the Ontario Recreational Canoeing and Kayaking Association (ORKA) and other agents plus the successors and assigns of each of the foregoing.

### **Description and Acknowledgement of Risks**

- 3. I understand and acknowledge that:
  - a) The Activities have foreseeable and unforeseeable inherent risks, hazards and dangers that no amount of care, caution or expertise can eliminate, including without limitation, the potential for serious bodily injury, permanent disability, paralysis and loss of life,
  - b) The Organization may offer or promote online programming (such as webinars, remote conferences, workshops, and online training) which have different foreseeable and unforeseeable risks than in-person programming,
  - c) The Organization has a difficult task to ensure safety and it is not infallible. The Organization may be unaware of my fitness or abilities, may misjudge weather or environmental conditions, may give incomplete warnings or instructions, and the equipment being used might malfunction,
  - d) (COVID-19) The COVID-19 disease has been declared a worldwide pandemic by the World Health Organization and is extremely contagious. The Organization has put in place preventative measures to reduce the spread of COVID-19; however, the Organization cannot guarantee that I will not become infected with COVID-19. Further, participating in the Activities could increase my risk of contracting COVID-19.
- 4. I am participating voluntarily in the Activities. In consideration of my participation, I hereby acknowledge that I am aware of the risks, dangers and hazards associated with or related to the Activities. I understand that the Organization may fail to safeguard or protect me from the risks, dangers and hazards of the Activities, some of which are listed below. The risks, dangers and hazards include, but are not limited to:
  - a) The inherent risks of the Activities, including:
    - Improper or incomplete provision or maintenance of paddling equipment, such as canoes, kayaks, stand up paddle boards, paddles, PFDs, and paddling rescue safety equipment,
    - ii. Improper or incomplete provision or maintenance of tripping equipment, such as tents tarps, kitchen equipment, and packs,
    - Improper or incomplete provision or maintenance of transportation equipment, such as vehicles, paddling equipment, and tripping equipment.
    - iv. Improper or incomplete provision or maintenance of first-aid resources or equipment, such as first-aid kits and material,
    - v. Improper or incomplete provision of participant registration information, such as waivers, medical forms, emergency contact forms, and determination of swimming ability, paddling ability/experience, and general level of fitness,
    - vi. Improper or incomplete provision of food and water-related information, such as nutrition, hydration, water purification, wildlife management, and food preservation,
    - vii. Inability to properly secure or prepare the 'instructional environment' location or 'wilderness tripping route', which may include a waterfront dock, public beach site, campsite or portage route, private property, a conservation area, a Provincial or National Park, or crown land,
    - viii. Risks associated with transporting participants or equipment,
    - ix. Risks associated with paddling in rough water conditions, encountering water hazards, swimming/floating, using paddles, using rope and other paddling equipment, carrying a canoe and other paddling equipment, and with accidents or illness in a remote place without medical facilities,
    - x. Improper or incomplete accounting for safe wilderness travel, weather, or paddling,
    - xi. Inability to provide a safe wilderness camping environment, such as by failing to be aware of site hazards, lack of awareness of hazards (related to the kitchen, stove, fire pit, and camp hygiene), failing to follow swimming protocol, and prolonging exposure to the elements,
    - xii. Inability to provide for emergency response, such as by creating an evacuation plan, rescuing the Participant or equipment, determining an alternate route, sourcing alternate leadership, or providing first-aid.
  - b) Health: executing strenuous and demanding physical techniques; physical exertion; overexertion; repetitive actions; stretching; dehydration; fatigue; cardiovascular workouts; rapid movements and stops; lack of fitness or conditioning; traumatic injury; hyperthermia; hypothermia; sprains and fractures, spinal cord injuries, bacterial infections; drowning; rashes; contact with plants, animals, reptiles or insects; and the transmission of communicable diseases, including viruses of all kinds, COVID-19, bacteria, parasites or other organisms or any mutation thereof,
  - c) Premises: defective, dangerous or unsafe condition of the facilities; falls; collisions with objects, equipment or persons; dangerous, unsafe, or irregular conditions on the ground or other surfaces; extreme weather conditions; and travel to and from the premises,
  - d) Use of equipment: mechanical failure of the equipment; negligent design or manufacture of the equipment; the provision of or the failure by the Organization to provide any warnings, directions, instructions or guidance as to the use of the equipment; failure to wear safety or protective equipment; and failure to use or operate equipment within my own ability,
  - e) Contact: contact with equipment associated with the Activities, other equipment, vehicles, or other persons; and other contact that may lead to serious bodily injury, including but not limited to concussions and/or other brain injury or serious spinal injury,
  - f) Advice: negligent advice regarding the Activities,
  - g) Ability: failing to act safely or within my own ability or within designated areas,
  - h) Cyber: privacy breaches; hacking; and technology malfunction or damage,
  - i) Conduct: my conduct and conduct of other persons including any physical altercation between participants,
  - j) Travel: travel to and from the Activities,

k) Negligence: my negligence and negligence of other persons, including NEGLIGENCE ON THE PART OF THE ORGANIZATION, which may increase the risk of damage, loss, personal injury or death.

#### Terms

- 5. In consideration of the Organization allowing me to participate in the Activities, I agree:
  - a) That when I practice or train in my own space, I am responsible for my surroundings and the location and equipment that I select,
  - b) That my mental and physical condition is appropriate to participate in the Activities and I assume all risks related to my mental and physical condition,
  - c) To comply with the rules and regulations for participation in the Activities,
  - d) To comply with the rules of the equipment,
  - e) That if I observe an unusual significant hazard or risk, I will remove myself from participation and bring my observations to a representative of the Organization immediately,
  - f) The risks associated with the Activities are increased when I am impaired and I will not to participate if impaired in any way,
  - g) That it is my sole responsibility to assess whether any Activities are too difficult for me. By commencing an Activity, I acknowledge and accept the suitability and conditions of the Activity,
  - h) That I am responsible for my choice of safety or protective equipment and the secure fitting of that equipment,
  - i) (COVID-19) That COVID-19 is contagious in nature and I may be exposed to, or infected by, COVID-19 and such exposure may result in personal injury, illness, permanent disability, or death.

## **Release of Liability and Disclaimer**

- 6. In consideration of the Organization allowing me to participate, I agree:
  - a) That the sole responsibility for my safety remains with me,
  - b) To ASSUME all risks arising out of, associated with or related to my participation,
  - c) That I am not relying on any oral or written statements made by the Organization or its agents, whether in a brochure or advertisement or in individual conversations, to agree to participate in the Activities,
  - d) To WAIVE any and all claims that I may have now or in the future against the Organization,
  - e) To freely ACCEPT AND FULLY ASSUME all such risks and possibility of personal injury, death, property damage, expense and related loss, including loss of income, resulting from my participation in the Activities,
  - f) To FOREVER RELEASE and INDEMNIFY the Organization from any and all liability for any and all claims, demands, actions, damages (including direct, indirect, special and/or consequential), losses, actions, judgments, and costs (including legal fees) (collectively, the "Claims") which I have or may have in the future, that might arise out of, result from, or relate to my participation in the Activities, even though such Claims may have been caused by any manner whatsoever, including but not limited to, the negligence, gross negligence, negligent rescue, omissions, carelessness, breach of contract and/or breach of any statutory duty of care of the Organization,
  - g) To FOREVER RELEASE AND INDEMNIFY the Organization from any action related to my becoming exposed to or infected by COVID-19 as a result of, or from, any action, omission or negligence of myself or others, including but not limited to the Organization,
  - h) That the Organization is not responsible or liable for any damage to my vehicle, property, or equipment that may occur as a result of the Activities,
  - i) That negligence includes failure on the part of the Organization to take reasonable steps to safeguard or protect me from the risks, dangers and hazards associated with the Activities,
  - j) This release, waiver and indemnity is intended to be as broad and inclusive as is permitted by law of the Province of Ontario and if any portion thereof is held invalid, the balance shall, notwithstanding, continue in full legal force and effect.

### Jurisdiction

7. I agree that in the event that I file a lawsuit against the Organization, I will do so solely in the Province of Ontario and further agree that the substantive law of the Province of Ontario will apply without regard to conflict of law rules.

## Acknowledgement

8. I acknowledge that I have read and understood this agreement, that I have executed this agreement voluntarily, and that this agreement is to be binding upon myself, my heirs, spouse, children, guardians, next of kin, executors, administrators and legal or personal representatives. I further acknowledge by signing this agreement I have waived my right to maintain a lawsuit against the Organization on the basis of any claims from which I have released herein.

	this Agraement	
Primary Applicant - all Participants must sign Name:	tilis Agreement	Today's Date:
rume.		loudy 5 Bate.
Signature:		Date of Birth:
By my signature I acknowledge and agree to	the Risks, Release Of	Liability, and waver of Claims described in
paragraphs 1 and 8 above on behalf of myse		
Address:	City:	Postal Code:
Phone #:	Email:	
Additional Family Members		
Family of Primary Applicant (same household)		
Name of participant:	Signature:	Date:
Relationship to Primary Applicant:	•	
Name of participant:	Signature:	Date:
Relationship to Primary Applicant:	<b>'</b>	
Name of participant:	Signature:	Date:
Relationship to Primary Applicant:		
Family of Primary Applicant (same household) an authorized representative must also sign the		r 18 years of age,
	iis Agreement	
Name of minor participant:		
Name of minor participant:		D .
	Signature:	Date:
Name of minor participant:  Name of minor participant:	Signature:	Date:
Name of minor participant:		
	By my signature I r	epresent that I have authority to act on behalf nd acknowledge my agreement to the above in
Name of minor participant:	By my signature I r of the Participant a my own right and c	epresent that I have authority to act on behalf nd acknowledge my agreement to the above in n behalf of the Participants and my heirs,
Name of minor participant:  Name of minor participant:	By my signature I r of the Participant a my own right and c	epresent that I have authority to act on behalf nd acknowledge my agreement to the above in
Name of minor participant:  Name of minor participant:  Name of minor participant:	By my signature I r of the Participant a my own right and o assigns, personal r	epresent that I have authority to act on behalf nd acknowledge my agreement to the above in n behalf of the Participants and my heirs, epresentatives and next of kin.
Name of minor participant:  Name of minor participant:  Name of minor participant:  Please complete this form and submit with the second contents.	By my signature I r of the Participant a my own right and o assigns, personal r	epresent that I have authority to act on behalf nd acknowledge my agreement to the above in n behalf of the Participants and my heirs, epresentatives and next of kin.
Name of minor participant:  Name of minor participant:  Name of minor participant:  Please complete this form and submit with the are available at weccc.org\joinus . If the pages are	By my signature I r of the Participant a my own right and o assigns, personal r	epresent that I have authority to act on behalf acknowledge my agreement to the above in n behalf of the Participants and my heirs, epresentatives and next of kin.  family. This forms and online payment options ease include the first page with your initials on it.
Name of minor participant:  Name of minor participant:  Name of minor participant:  Please complete this form and submit with the second contents.	By my signature I r of the Participant a my own right and o assigns, personal r	epresent that I have authority to act on behalf acknowledge my agreement to the above in n behalf of the Participants and my heirs, epresentatives and next of kin.  family. This forms and online payment options ease include the first page with your initials on it.
Name of minor participant:  Name of minor participant:  Name of minor participant:  Please complete this form and submit with the are available at weccc.org\joinus . If the pages are available at weccc.org\joinus application in to the	By my signature I r of the Participant a my own right and o assigns, personal r	epresent that I have authority to act on behalf acknowledge my agreement to the above in n behalf of the Participants and my heirs, epresentatives and next of kin.  family. This forms and online payment options ease include the first page with your initials on it.
Name of minor participant:  Name of minor participant:  Name of minor participant:  Please complete this form and submit with the are available at weccc.org\joinus. If the pages are available at on our contact list immediately.	By my signature I rof the Participant a my own right and of assigns, personal representations of \$35.00 personal fee of \$35.00 personal fee printed separately please email meaning the Paypal []	epresent that I have authority to act on behalf acknowledge my agreement to the above in n behalf of the Participants and my heirs, epresentatives and next of kin.  family. This forms and online payment options ease include the first page with your initials on it.
Name of minor participant:  Name of minor participant:  Name of minor participant:  Please complete this form and submit with the are available at weccc.org\joinus. If the pages are available at meccc.org\joinus application in to the email on our contact list immediately.  Office use only: Cheque   Cash	By my signature I rof the Participant a my own right and of assigns, personal representations of \$35.00 personal fee of \$35.00 personal fee printed separately please email meaning the Paypal []	epresent that I have authority to act on behalf acknowledge my agreement to the above in n behalf of the Participants and my heirs, epresentatives and next of kin.  family. This forms and online payment options ease include the first page with your initials on it.

Website- Facebook Page- www.weccc.org www.facebook.com/weccc

Email Addressweccc.org@gmail.com