



## LEAD THRU SPORT ACTIVITY WAIVER & RELEASE

I/We, the undersigned parents/legal guardians of the participant \_\_\_\_\_ (please print) (the "Participant") who will be participating in a camp (the "Program") operated by LEAD THRU SPORT (the "Activity Provider"), hereby irrevocably and unconditionally:

1. release and forever discharge the Activity Provider, its owners, directors, officers, employees, agents, assigns, legal representatives and successors from all manner of actions, causes of action, debts, accounts, bonds, contracts, claims and demands for or by reason of any injury to person or property, including injury resulting in the death of the Participant, which has been or may be sustained as a consequence of the Participant's participation in the the Program, and notwithstanding that such damage, loss or injury may have been caused solely or partly by the negligence of the Activity Provider;
2. represent and warrant that the Participant is in good health and physical condition and can participate in the activity described below, and acknowledge and understand that participation in and attendance at the Program involves certain risks and dangers either specifically as a result of participation in the Program or generally in connection with the Participant's attendance there. Participating in the Program involves a risk of injury or death and/or damage to or loss of property. Participants and/or the Participant's parents/legal guardians must assume these risks;
3. agree the Participant may participate in the following activity, but is not necessarily limited to: Basketball, volleyball, soccer, pickleball, rugby, and low organizational games;
4. agree that, in the Program that I cannot be reached in a medical emergency, I hereby authorize and permit the Released Parties and Program personnel to administer first aid to the Participant, and to authorize such other medical treatment and transportation as may be recommended by physicians, paramedics, and other medical personnel, in the Program of any illness, accident or injury to the participant;
5. further agree that this document is in accordance with and governed by the laws of the Province of Ontario.

**I HAVE READ THIS ACKNOWLEDGEMENT, RELEASE AND WAIVER FORM CAREFULLY. I FULLY UNDERSTAND ITS CONTENT, AND VOLUNTARILY AGREE TO ITS TERMS. BY SIGNING THIS ACKNOWLEDGEMENT, RELEASE AND WAIVER, I UNDERSTAND THAT I, ON BEHALF OF MYSELF AND THE PARTICIPANT, THE PARTICIPANT'S PARENTS OR GUARDIANS, HEIRS, ESTATE, INSURERS, ASSIGNS AND ANYONE ELSE WHO MAY MAKE ANY CLAIM FOR OR ON BEHALF OF THE PARTICIPANT, AM WAIVING CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE.**

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date