



WAIVER OF LIABILITY

The undersigned being of the full age of sixteen (16) years, does hereby acknowledge they are engaged in a program of physical activity using the premises and equipment of Gerald Marentette at 1530 County #22, in the Township of Lakeshore in the Province of Ontario: and the said undersigned does hereby waive and forever discharge the said Gerald Marentette, his spouse and children and insurers, from any and all liability for damages or injuries sustained by or as are result of the equipment or premises, either supervised or otherwise of the said Gerald Marentette and does further release the said Gerald Marentette from all law suits, demands and causes or action arising out of any activity whatever of the undersigned conducted by the undersigned on the premises or using any of the said Gerald Marentette.

Dated at Lakeshore Township, this day of: _____

Please check one - New Member: ___ **or Renewal:** ___

Print Name: _____

(first)

(last)

Address: _____

(#)

(Street)

(Town)

Phone Number: (_____) Home (_____) Cell

Signature: _____

Under the age of 16, the guardian's signature is required _____

Print Name _____