

TEAM REGISTRATION FORM – Fill and Print

Event Name: _____

Team Name: _____

Team Sponsor(s):

Team History/Awards:

Race Category (Limit of one category per registrant): Mixed Womens

Breast Cancer Challenge Race: Yes No

Additional Categories (for awards purposes): Junior Senior Local

Team Manager

Name: _____

Address: _____

Phone 1: _____ Phone 2: _____

Email*: _____

***this is how you will receive all festival information**

Alternate Contact

Name: _____

Address: _____

Phone 1: _____ Phone 2: _____

Email*: _____

***this is how you will receive all festival information**

Accredited Steersperson: Yes No

PLEASE PROCEED TO THE GROUP WAIVER AND ROSTER FORMS

ADULT GROUP WAIVER FORM
GO ROWING & PADDLING ASSOCIATION OF CANADA (GO)

Release of Liability, Waiver of Claims, Assumption of Risks and Indemnity Agreement, (the "Agreement")

BY SIGNING THIS AGREEMENT YOU WILL GIVE UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE

PART ONE (ALL FIELDS ARE REQUIRED): Fill, Print, and Initial

Re: Participation in the GO Rowing & Paddling Association of Canada (GO) rowing and paddling programs/events, pursuant to the GO safety guidelines, rules and regulations, (collectively referred to as the "Rules").

PLEASE TYPE:

Manager: _____ Team: _____ Event: _____

Address: _____ City: _____ Prov.: _____ Postal Code: _____

Phone: _____ Fax: _____ Email: _____

(All personal information given by participants will only be used for administration and regular communication with respect to related programs/events with GO).

To: GO, and their respective directors, officers, employees, contractors, representatives, officials, agents, and volunteers.

In this Agreement:

- the term, "rowing and paddling programs" shall include but is not limited to: competitions, races, festivals, demonstrations, practices, events, boat rentals, orientation and instruction sessions, and other such activities, events and services in any way connected with or related to the GO; and
- the term, "Releasees" shall include the GO, affiliate centres and events, sponsors, official suppliers, officials, and all of their respective directors, officers, employees, volunteers, agents, representatives, successors and assigns.

• **ACKNOWLEDGEMENT – SAFETY**

I am aware that the physical exertion required of rowing and paddling programs and the forces exerted on the body can activate or aggravate pre-existing physical injuries, conditions, symptoms or congenital defects. I HAVE ALSO READ AND UNDERSTAND THE RULES AND REGULATIONS, AND I AGREE TO ABIDE BY THOSE GUIDELINES. (Rules and Regulations are posted on the event website).

• **ASSUMPTION OF RISKS**

I am aware and understand that rowing and paddling programs and rowing and paddling sports have inherent dangers, hazards and risks including, but not limited to:

- | | | |
|---|---|--|
| • ACCIDENTS WHICH OCCUR WHILE LOADING AND UNLOADING EQUIPMENT | • EQUIPMENT FAILURE | • FACILITY & SITE HAZARDS |
| • ABRUPT WEATHER CHANGES | • IMPROPER USE OF EQUIPMENT | • NEGLIGENCE OF THE RELEASEES |
| • COLLISION WITH MANMADE OR NATURAL OBJECTS OR OTHER PADDLERS OR BYSTANDERS | • NEGLIGENCE OF OTHERS | • SUSTAINED RIGOROUS PHYSICAL ACTIVITY |
| • CONDITIONS OF WATER SURFACE AND VARIATIONS IN THE WATER CONDITIONS, SURFACES AND CURRENTS | • OVERTURNING OR UPSETTING OF THE BOAT | • TRAVEL TO AND FROM SITE |
| | • FALLING FROM THE BOAT WHILE ON THE WATER | • DROWNING |
| | • POOR SWIMMING ABILITY OF MYSELF OR OTHERS | • IMMERSION IN COLD WATER |
| | | • HYPOTHERMIA |

I understand that injuries resulting from the danger, hazards and risks of rowing and paddling programs and sports are a probable occurrence of such programs and sports. I am also aware that there is a risk of NEGLIGENCE ON THE PART OF THE RELEASEES, INCLUDING THE FAILURE BY THE RELEASEES TO SAFEGUARD OR PROTECT ME FROM THE DANGERS, HAZARDS AND RISKS OF PADDLING PROGRAMS AND SPORTS.

I freely accept and fully assume all dangers, hazards and RISKS associated with participation in rowing and paddling programs and sports and the possibility of personal injury, death, property damage or loss resulting therefrom.

• **RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY**

I acknowledge that it remains my sole responsibly to act in such a manner as to be responsible for my own safety and participate within my own limits. I understand that the Rules are solely for the purpose of regulating other rowing and/or paddling program participants and me.

In consideration of the Releasees agreeing to my participation in rowing and/or paddling programs & events and permitting my use of their equipment and facilities, I hereby agree as follows:

- TO WAIVE ANY AND ALL CLAIMS that I have or may in the future have against THE RELEASEES AND TO RELEASE THE RELEASEES from any and all liability for any loss, damage, expense or injury including death that I may suffer, or that my next of kin may suffer as a result of my participation in rowing and/or paddling programs due to any cause whatsoever, including negligence, breach of contract, or breach of any statutory or other duty of care, on the part of the Releasees;
- TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any damage or personal injury to any third party resulting from my participation in rowing and/or paddling programs; and
- This Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators and representatives, in the event of my death or incapacity.

In entering into this Agreement I am not relying on any oral or written representations or statements made by the Releasees with respect to the safety of paddling programs & events other than what is set forth in this Agreement.

I CONFIRM THAT I HAVE READ AND UNDERSTOOD THIS AGREEMENT PRIOR TO SIGNING IT, AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND REPRESENTATIVES MAY HAVE AGAINST THE RELEASEES.

GO TO PART TWO ON FOLLOWING PAGE TO COMPLETE ADULT GROUP WAIVER >>>

Manager
Must Initial
Here

**ADULT GROUP WAIVER FORM
GO ROWING & PADDLING ASSOCIATION OF CANADA (GO)**

PART TWO: ADULT Team Roster (ALL FIELDS ARE REQUIRED) – Fill, Print and Sign

Team Name:	Event Name:
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BY SIGNING BELOW, I CONFIRM THAT I HAVE READ AND UNDERSTOOD THIS AGREEMENT PRIOR TO SIGNING IT, AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND REPRESENTATIVES MAY HAVE AGAINST THE RELEASEES.

#	Name (Please type)	Email or address (please type)	Signature
1	Captain:		
2	Steer:		
3	Drummer:		
4			
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As team manager I acknowledge that no person is permitted to board the dragon boat unless his or her name is on this list. I certify that the persons, whose names are listed above, have read and understand the waiver form.

Manager's name (type): _____ Email: _____

Manager's signature: _____ Date: _____

Witness name (type): _____ Witness signature: _____

GO ROWING & PADDLING ASSOCIATION OF CANADA (GO)
Youth Group Acknowledgement of Risks - For Registrants Under 19 years of age

BY SIGNING THIS YOU ACKNOWLEDGE THAT YOU ARE AWARE OF CERTAIN RISKS

PLEASE READ CAREFULLY and provide all information required for Part One and Part Two of this Group Acknowledgement of Risk Form

PART ONE (ALL FIELDS ARE REQUIRED): Fill and Print

Re: Participation in the GO Rowing & Paddling Association of Canada (GO) rowing and paddling programs and events (pursuant to the GO guidelines, rules and regulations (collectively called the "Rules")).

Manager: _____ Team: _____ Event: _____

Address: _____ City: _____ Prov.: _____ Postal Code: _____

Phone: _____ Fax: _____ Email: _____

(All personal information given by participants will only be used for administration and regular communication with respect to related programs & events with GO).

TO: GO, and their respective directors, officers, employees, contractors, representatives, officials, agents, and volunteers.

• **ACKNOWLEDGEMENT OF RISKS**

I am aware and understand that rowing and paddling sports has inherent dangers, hazards and risks (collectively called the "RISKS"). The following is only a partial list of examples of these RISKS:

- ABRUPT WEATHER CHANGES
- COLLISION WITH MANMADE OR NATURAL OBJECTS OR OTHER ROWERS OR BYSTANDERS
- CONDITIONS OF WATER SURFACE
- EQUIPMENT FAILURE
- IMPROPER USE OF EQUIPMENT
- NEGLIGENCE OF OTHER ROWERS
- OVERTURNING
- POOR SWIMMING ABILITY
- ROWING SITE HAZARDS
- SUSTAINED RIGOROUS PHYSICAL ACTIVITY
- TRAVEL TO AND FROM ROWING SITE
- WATER TEMPERATURE

I understand that injuries resulting from such RISKS are a possible occurrence of rowing and paddling sports.

I acknowledge that it is my responsibility to act in such a manner as to be responsible for my own safety and participate within my own limits.

I, as a parent or guardian of the Registrant, acknowledge that, by my signing this document, I am, in addition to the Registrant and others, assuming the responsibility to educate and inform the Registrant of the RISKS.

**GO TO PART TWO ON FOLLOWING PAGE TO COMPLETE YOUTH GROUP
ACKNOWLEDGEMENT OF RISKS >>>**

GO ROWING & PADDLING ASSOCIATION OF CANADA (GO)
Youth Group Acknowledgement of Risks - For Registrants Under 19 years of age

PART TWO: – YOUTH Team Roster (ALL FIELDS ARE REQUIRED) – Fill, Print and Sign

Team Name:	Event Name:
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By signing below, I understand that injuries resulting from such RISKS are a possible occurrence of rowing and paddling sports. I acknowledge that it is my responsibility to act in such a manner as to be responsible for my own safety and participate within my own limits. I, as a parent or guardian of the Registrant, acknowledge that, by my signing this document, I am, in addition to the Registrant and others, assuming the responsibility to educate and inform the Registrant of the RISKS.

#	Name (Please type)	Youth Signature	Parent/Guardian Signature
1	Captain:		
2	Steer:		
3	Drummer:		
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As team manager I acknowledge that no person is permitted to board the dragon boat unless his or her name is on this list. I certify that the persons, whose names are listed above, have read and understand the waiver form.

Manager's name (type): _____ Email: _____

Manager's signature: _____ Date: _____

Witness name (type): _____ Witness signature: _____