

DRAGONBOAT ASSOCIATION OF SOUTHERN ALBERTA

Culture, Sportsmanship, Communication, Safety, Fitness and Fairness

18+ ADULT MEMBERSHIP FORM - 2022 SEASON

PLEASE PRINT CLEARLY.

First & Last Name: _____ Ph #: _____

City: _____ Email Address: _____

Team: _____ Emerg. Contact: _____ Ph #: _____

I here-in enclose, have previously paid, or e-transferred to treasurerdasa@gmail.com my 2022 Membership fee in full.

ADMIN USE ONLY: Paid To: _____ Date: _____ Method: _____

Your signature is required on the other side of this form, to be completed after reading, initialing, and agreeing to all below. By signing the form and initialing at the arrows, you waive DASA of all liability, claims, assumption of risk and indemnity regarding any claims.

DASA Release of Liability, Waiver of Claims, Assumption of Risks & Indemnity Agreement

I hereby release and discharge the City of Lethbridge and the Dragonboat Association of Southern Alberta (herein referred to as "DASA"), its agents, coaches, directors, employees, members, officers, sponsors and volunteers (herein collectively referred to as "personnel") from all claims, demands, actions, judgements, and executions which the undersigned's heirs, successors, executors, administrators, representatives, or assigns may have, or claim to have for any and/or all personal injuries, known and unknown, and injuries to property, real or personal, caused by or arising out of, the participation in the activity of dragon boating not limited to dry land training (e.g. physical workouts), pool practices, on water practices, and/or racing at any venue.

---> _____ I, the below-signed, fully understand, acknowledge, and agree that this sport activity has inherent risks involved, and I am fully aware of the nature of these risks. Notwithstanding these risks, I hereby indemnify and waive any and all rights, claims, prospective causes of action, cause of action, etc. as heretofore enumerated, and I hereby assume any and all risk associated with my participation in this sporting activity.

I understand that paddling on lakes, reservoirs and rivers involve certain dangers, not all of which can be listed here. Among the more obvious and frequent are:

- Exposure to variable extremes in weather that may cause injury due to heat or cold, and which may prevent or force route and itinerary changes.
- Contact with and possible immersion in cold water for undetermined periods, leading to hypothermia and possible suffocation.
- Exposure to capsizing and sinking, rocks, trees, bridge abutments, log jams, rope entanglement, current patterns, and other possible sources of "in water" injury and entrapment.
- Unfamiliar terrain and routes where dragon boats could become separated from the party.
- Transport by public or private motor vehicle.
- Travel in remote locations with poor communications and inability to get rescue or medical assistance easily or quickly.

---> _____ I confirm that I am 18 years of age or older.

I am not relying on any oral or written statements, if any, made by DASA and its personnel, whether in brochure, advertisements or in individual conversations, to lead me to become involved in this program on any basis other than my assumptions of the risks involved.

I accept all of the risks and the possibility of death, personal injury, property damage, and loss, resulting from my involvement with practice and racing events.

I acknowledge that DASA personnel have been available to fully explain the various hazards and risks associated with this activity. In addition, I agree to read the DASA Safety Procedures on the DASA website under Documentation.

---> _____ **COVID Waiver, Release and Indemnity:** I am aware that COVID-19 is a worldwide pandemic and is extremely contagious. DASA has put in place preventative measures to reduce the spread of COVID-19; but cannot guarantee that I will not become infected with COVID-19. Further, participating could increase my risk of contracting COVID-19 and I may be exposed to, or infected by, COVID-19 and such exposure may result in personal injury, illness, permanent disability, or death. I agree To FOREVER RELEASE AND INDEMNIFY DASA 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 DASA.

I, the below signed, have read this waiver/release carefully before signing, and confirm that I understand all of its terms and conditions. I execute it voluntarily and with full knowledge of its significance. I understand that it will be binding, not only by me, but also by my heirs, next of kin, personal representatives and assigns.

I agree that, even though I, my child or charge, or organization may not live/be in Alberta, the laws of the province of Alberta and the City of Lethbridge by-laws govern this waiver of liability and release of claims and will be enforceable in any court of law.

Privacy Statement: DASA respects your privacy. We do not rent, sell or trade our mailing lists or information or photos (electronic or digital). By completing this form, or by providing information to us and participating in our festival, you will be consenting to our use of such information for DASA's purposes and related activities. DASA uses the information you provide to organize and run our practices, to keep you informed and updated on the activities of the DASA related promotions, to promote special events and sponsorships, and all other activities related to the events held by DASA from time to time. **If you wish us not to utilize your information or photos for our purposes, please email DASALethbridge@gmail.com with this request.** Please note if you notify us that you do not wish us to use any information for our purposes as set out above, communications to you of what happens during events or information relating to events may not be communicated to you, even though you have registered as a member.

I agree to abide by and accept the preceding DASA Waiver of Indemnity, Liability & Release of Claims.

Date: _____

Name (print): _____ Witness (print): _____

Signature: _____ Witness (sign): _____