

# ST. MARY'S BOAT CLUB Rental Waiver

Phone: 902.490.4688

## Consent Form

I, \_\_\_\_\_ on behalf of myself, my heirs, executors, administrators and assignees, hereby acknowledge that I am participating in the program and activities connected herewith at my sole risk. I exonerate and release the Halifax Regional Municipality, it's agents, servants, employees, and all who act on its behalf from all responsibility and claims for any injury that I may suffer while participating in such a program.

I am renting: \_\_\_Canoe \_\_\_Kayak \_\_\_Stand-up Paddle Board

### FORM MUST BE FILLED COMPLETELY AND LEGIBLY

Participant Information		
Full Name:	Phone:	
	Date of Birth:	
Emergency Contact Not a Co-Participant	Children/Minors	
	Full Name	Date of Birth
Full Name:		
Phone:		
Relationship:		

Name	Signature	Date
------	-----------	------