

**RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS AND INDEMNITY AGREEMENTS (HEREINAFTER THE "RELEASE AGREEMENTS")**  
**BY SIGNING THIS DOCUMENT YOU WILL WAIVE OR GIVE UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE FOR NEGLIGENCE , BREACH OF CONTRACT OR BREACH OF THE OCCUPIERS LIABILITY ACT OR CLAIM COMPENSATION FOLLOWING AN INCIDENT**

**PLEASE READ CAREFULLY!**

**Contact Information**

**INITIALS:**

Full Name of Participant	
Date of Birth	
Address	
Phone Number	
Email	

TO: Shayne Stevenson, Fishing Guide / Captain OPERATING AS 50 Mission Cast **CHARTERS;AND HIS MAJESTY THE KING IN RIGHTS OF CANADA;** and their directors, officers, employees, guides, agents, independent contractors, subcontractors, representatives, successors and assigns (all of whom are hereinafter collectively referred to as "the Releasees")

**WILDERNESS ACTIVITIES**

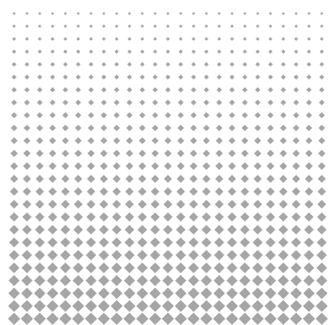
In this Release Agreement, the term "**wilderness activities**" shall include but is not limited to: boating, fishing, swimming, mooring, guiding, any water related activities whatsoever that have been, arranged or organized by the Releasees including orientation and instructional sessions or classes, transportation, accommodation, food and beverage, and water supply, and all travel by or movement around boats or recreational vehicles or other vehicles and camping or overnight stays in the outdoors.

In this Release Agreement, the term "**Negligence**" includes the failure by the Releasees to use such care as a reasonably prudent and careful Fishing guide/instructor would use under similar circumstances, or breach of any other duty of care imposed by law.

**I AM AWARE OF THE RISKS, DANGERS AND HAZARDS ASSOCIATED WITH WILDERNESS ACTIVITIES AND I FREELY ACCEPT AND FULLY ASSUME ALL SUCH RISKS, DANGERS AND HAZARDS AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, PROPERTY DAMAGE OR LOSS RESULTING THEREFROM INCLUDING NON-SCHEDULED OR EMERGENCY EVACUATION, RESCUE OR ANY AND ALL FIRST AID SERVICES PERFORMED.** I acknowledge and agree that all expenses associated with non-scheduled or emergency evacuation, rescue or first aid will be my responsibility and will not be covered by the Releasees in any way whatsoever.

Participant's Signature

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 Date:-----



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**PLEASE READ CAREFULLY!**

**INITIALS:**

**ASSUMPTION OF RISKS - TERRAIN, WILDERNESS, TRAVEL, WEATHER** I am aware that participation in wilderness activities involves many risks, dangers and hazards. I am aware that the Releasees may fail to predict Terrain, Wilderness, Travel, and Weather conditions that may inadvertently affect my overall Guiding experience.

**RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT** In consideration of the Releasees allowing me to participate in wilderness activities as defined in this Release Agreement, I hereby agree as follows:

- 1. **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 wilderness activities, DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, INCLUDING ANY DUTY OF CARE OWED UNDER ANY APPLICABLE OCCUPIER'S LIABILITY LEGISLATION ON THE PART OF THE RELEASEES. I UNDERSTAND THAT NEGLIGENCE INCLUDES FAILURE ON THE PART OF THE RELEASEES TO TAKE REASONABLE STEPS TO SAFE GUARD OR PROTECT ME FROM OR WARN ME OF THE RISKS, DANGERS AND HAZARDS OF WILDERNESS ACTIVITIES REFERRED TO ABOVE;
- 2. **TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES** from any and all liability for any property damage or personal injury to any third party resulting from my participation in wilderness activities;
- 3. This Release Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives, in the event of my death or incapacity;
- 4. This Release Agreement and any rights, duties and obligations as between the parties to this Release Agreement shall be governed by and interpreted solely in accordance with the laws of the province where the wilderness activities take place and no other jurisdiction.
- 5. Any litigation involving the parties to this Release Agreement shall be brought solely within the province where the wilderness activities take place and shall be within the exclusive jurisdiction of the Courts of that province.

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

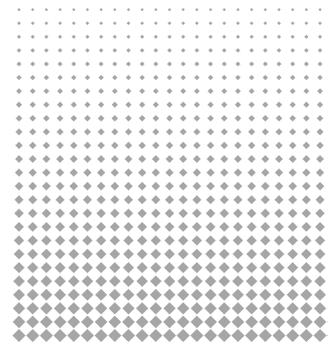
**I CONFIRM THAT I HAVE READ AND UNDERSTAND THIS RELEASE AGREEMENT PRIOR TO SIGNING IT, AND I AM AWARE THAT BY SIGNING THIS RELEASE AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS, ASSIGNS AND REPRESENTATIVES MAY HAVE AGAINST THE RELEASEES.**

Witness Signature
Please Print Name of Witness

Participant's Signature

Signature of client/student
Date
Signature of Parent or Guardian if under age 19

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 Date:-----



## MEDICAL INFORMATION FORM

<b>Name</b>	Last		First	Initial
<b>Birth Date</b>	Year	Month	Day	Age

### Emergency Contact Information:

<b>NAME</b>			Relationship
<b>TELEPHONE</b>	HOME	Office	Mobile

### Medical Information:

<b>ALLERGIES</b>		
<b>MEDICATIONS</b>		
<b>MEDICAL CONDITIONS</b>		
<b>FAMILY DOCTOR</b>		Phone
<b>MEDICAL INSURANCE NUMBER AND CARRIER</b>		
<b>IS THERE ANY OTHER HEALTH OR MEDICAL INFORMATION YOU WANT US TO KNOW ABOUT</b>		

Participant's Signature/Parent or Guardian

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Date: -----

