



Let's Play in the Park - Participation Waiver

Revised: May 26, 2016

PLEASE READ CAREFULLY BEFORE SIGNING

The Corporation of the City of Mississauga and Mississauga Fire & Emergency Services (jointly hereinafter the "City"), its employees, Mayor and Members of Council, leaders, volunteers, and volunteer leaders (hereinafter the "Released Parties")

The Let's Play in the Park program delivered by The City of Mississauga, Recreation (hereinafter the "program")

I fully understand and agree to the following:

Assumption of Risks: Participation in the Let's Play in the Park Program involves various risks, dangers and hazards which all participants/parents guardians are required to assume that are a usual to outdoor child paly or activities usual to group games using balls, Frisbees etc. I hereby freely accept and fully assume all such risks, dangers and hazards and the possibility of personal injury, death, property or loss resulting from my child participating

Consent to Medical Treatment: I agree to hereby give permission to allow the City and the Released Parties to arrange for any emergency medical care including hospitalization and transportation, if necessary, to the administration of such emergency medical treatment as may be deemed necessary in the circumstances for my child. I agree to pay all costs associated with medical care and transportation on behalf of my child.

Release: In consideration of being granted permission to participate in the above-noted Program, I hereby for myself, my heirs, executors, administrators, or any others who may claim on my behalf, covenant not to sue, and hereby waive, release and discharge the City and the Released Parties from any and all claims of liability for personal injury, illness, loss of life or property damage of any kind or nature, arising out of or sustained in the course of my child's participation.

Indemnity: In consideration of being granted permission to participate in the above-noted Program, I agree to hold harmless and indemnify the City and the Released Parties from any and all liability, loss, claims, demands, costs and expenses, including reasonable legal fees, due to any personal injury or property damage to any third party arising from my child's participation in the Program.

Article I.

I AM AWARE OF THE NATURE AND EFFECT OF THIS ASSUMPTION OF RISKS, CONSENT TO MEDICAL TREATMENT, RELEASE, INDEMNITY AND FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

I am the parent or legal guardian of the participant who I certify is under the age of 18. I also certify that I have the legal authority to represent and bind the Participant/Volunteer. I have read this waiver and understand the nature and extend of the risks involved and, on behalf of the Participant/Volunteer, voluntarily agree to be bound by its contents.

Signature of Parent or Legal Guardian

Print Name Clearly

Date

Personal information on this form is collected under the authority of Sections 11 and 279 of the *Municipal Act, 2001* and will be used for the purpose of administering the City's Risk Management Program. Questions regarding collection of this information should be directed to Risk Management, 300 City Centre Drive, Mississauga ON L5B 3C1.

Recreation

 MISSISSAUGA