

WWW.OVERHANG.CA 2515 Recreation Drive, Prince George, BC, Canada

REGISTRATION FORM AND WAIVER

Today's Date// Month Day Yea	•					
				_/		
Full Name of Participant		Birthdate:		Month		
Street Address						
City	Province		Postal Code			
Cell Phone Number	Home Phone Number		Email Address			
Emergency Contact Name	Emergency Contact Phone Number					
To: OVERhang Education Centre Ltd called "the Agents"). 1. I agree as precondition to my parock climbing (referred to as "the bound by the terms of this Releated. 2. I acknowledge that "the Activities. 3. I fully understand the risks and compared to a bide by the rules and some street of the compared to a bide by the rules and some street of the compared to any cause whatsoever, including "the Agents".	c''the Company") and its director, of rticipation in all events organized by "the Activities") and in further consideration as of Liability, Waiver of Claims, Assumps" involve inherent risk and dangers that langers associated with my participation policies outlined in my orientation and ps which I may have against "the Company property damage or any other loss sustain negligence, breach of contract, or breach illimits the liability of "the Agents" to the hall parties to "the Agreement".	e Company" a of "the Comportion of Risk a may cause s in "the Activit osted within " and "the Agined by me a ch of any stati	nd/or "the any" allowerious in ties" and the Common series" and the common series aresult utory or	epresentatione Agents" in wing me to mity Agree jury and postaccept sampany's facility of release "the of my particulation other duty of the control of the	ncluding but not do so, that I will ment ("the Agre sible death to p e entirely at my y. ne Company" an cipation in "the A	limited to indoor strictly be sement). articipants. own risk. d "the Agents" Activities", due to ompany" and/ or
promise not to sue "the Company",	nave read and understand "the Agree and/or "the Agents" and that it cons	stitutes a re	lease of	liability an	d an indemnit	y for all claims.
If I am the parent and/or guardia child/ward.	in of the participant, I have under	rstand and	execut	te "tne Ag	reement" on	benait of my
SIGNATURE OF Parent/Guardian (if 18ye	ears or younger)					
PRINT NAME OF PARENT/GUARDIAN (If	applicable)					
SIGNATURE OF PARTICIPANT						