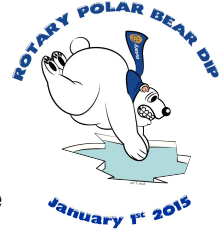


# Rotary Polar Bear Dip

## Waiver and Release Agreement



### PLEASE READ CAREFULLY BEFORE SIGNING

### THIS IS A RELEASE OF LIABILITY AND WAIVER OF CERTAIN LEGAL RIGHTS

In consideration of my being permitted to participate in the Rotary Polar Bear Dip (hereafter referred to as "the Event"), I agree to the following waiver and release:

I acknowledge that jumping into cold water, standing and walking upon ice, walking and lingering in the snow in the vicinity of the Event, lingering near and among the crowd gathered for the Event, and travelling to and from the Event and its various attractions have inherent risks, hazards and dangers. I understand that these risks, hazards and dangers include without limitation:

(1) Risks arising from exposure to large and sudden changes in environmental temperatures that can lead to loss of consciousness, Hypothermia, heart attacks, and other life-threatening conditions;

(2) Risks involved in standing and moving about on frozen portions of Lake Pesaquid and on snowy, icy, or irregular terrain;

(3) Such other risks, hazards, and dangers which are inherent to the sport of cold plunging and being out of doors during winter;

I am voluntarily participating in the Event with full knowledge of the inherent risks, hazards, and dangers involved and hereby assume and accept any and all risks of injury, paralysis, or death, and agree to abide by all Rotary Polar Dip rules, regulations and guidelines.

I agree that the Town of Windsor and Rotary International, including the Rotary Clubs of the Annapolis Valley, and their sponsors, volunteers and employees, shall not be liable or responsible for any injuries to me resulting from my participation in this Polar Bear Dip and I expressly release and discharge the Town of Windsor and Rotary International, including the Rotary Clubs of the Annapolis Valley, and their sponsors, volunteers and employees from all claims, actions, judgements and the like, which I or my heirs, executors, administrators or assigns may have or claim to have as a result of any injury, suits, expenses (including reasonable attorney's fees) and negligence of any kind or nature, whether foreseen or unforeseen, arising directly or indirectly out of any damage, loss, injury, paralysis, or death to me or my property as a result of participation in the Event, whether such damage, loss, injury, paralysis, or death results from the negligence or other acts however caused by or contributed to by the Rotary Polar Bear Dip and all related entities named above, or from some other cause. I attest that I am of the age of 19 years or older.

\*I am also agreeing to the publication of any photos taken of me during this event for future promotion of said event.

**I have carefully read, clearly understand, and voluntarily sign this waiver and release agreement.**

Print Name	Signature	Date	
Street Address	City	Province	Postal Code
Email Address	Age	Phone	

### If under 19 years of age, parent or guardian must sign the following indemnification

In consideration for the above minor being permitted to participate in the Event, I agree to the following waiver, release and indemnification: The undersigned parent and guardian of the above minor, for himself/herself and on behalf of said minor hereby joins in the foregoing waiver and release and hereby stipulates and agrees to save and hold harmless, indemnify, and forever defend the organizers of the Rotary Polar Bear Dip and any of its officers, agents, affiliates, employees, contractors, sponsors, or volunteers, from and against any and all claims, actions, demands, expenses, liabilities (including reasonable attorney's fees) and negligence made or brought by said minor or by anyone on behalf of said minor, as a result of said minor's participation in the Event. I, for myself and on behalf of said minor, further agree not to sue the organizers of the Rotary Polar Bear Dip, Town of Windsor and Rotary International, including the Rotary Clubs of the Annapolis Valley or any of its officers, agents, affiliates, employees, contractors, or volunteers, as a result of any injury, paralysis or death that said minor suffers in connection with participation in the Event.

\*I am also agreeing to the publication of any photos taken of my child during this event for future promotion of said event.

Signature of Parent or Guardian of Minor	Date	Print Name of Minor
Print Name of Parent or Guardian Witness	Date	Age of Minor