

LIABILITY RELEASE FORM

(Participant)

Element of Risk

I, the undersigned, acknowledge the risks involved in participation of school-related activities which occur outside the normal school venue ("Activities"), including but not limited to instruction in a course operated by the Prince Edward Island Association of Community Schools Incorporated ("the Community Schools") which occurs outside the normal school venue. I understand that property loss, injury, and even death, are all possible from participation in such Activities. I accept any and all responsibility for my safety while participating in such Activities with full understanding of the risks involved. I understand that I have the right to withdraw from or reduce my participation in such Activities at any point before or after commencement of such Activities, and I further understand that no one acting or purporting to act for or on behalf of the Community Schools has been authorized to compel my participation in such Activities.

Release of Liability

In consideration of the acceptance of my registration, and/or continued involvement in programming operated by the Community Schools, I hereby for myself, my heirs, executors, administrators, and any others who may claim on my behalf, hereby agree to release the Community Schools, its successors, assigns, insurers and anyone acting for or on behalf of the Community Schools, from any cause of action, claim for damages, or other legal action arising from my participation in such Activities.

In the Event of Conflict

I agree that to the extent that this Release conflicts with a prior agreement, written or otherwise, that this Release governs. I further agree that only a written agreement, signed by an Officer of the Community Schools and sealed with the Community Schools corporate seal, can revoke this Release.

I HAVE READ THIS CAREFULLY AND KNOW IT CONTAINS A RELEASE OF LIABILITY

I, the undersigned, state that I grant the release herein voluntarily. I recognize that by signing this document I am waiving certain legal rights, including the right to sue. I, the undersigned, further state that I am currently over the age of 18 years, and if I am not, that my parent/guardian has executed a Liability Release Form.

Student Name (please print)

Student Signature

Date of Student Signature

Student Age (to be completed if under 18 years)

School Representative (please print)

School Agent Signature (witness)