

Winter Assumption of Risk Release and Waiver of Liability Indemnity Agreement

PLEASE READ BEFORE SIGNING WARRANTY AND CONSENT

WARRANTY AND CONSENT						
Printed Name(s) of Participant						
Street Address	City/Village	Province/State	Postal Code/Zip Code			
Phone Number						
	N of allowing me to participate i Forest and Wild Life Reserve I		and activities (herein known as the			
I WARRANT TO YO		Limited, herem known as the	COMPANT.			
	are serious dangers and risks in	herent to any activity in a Fo	rest environment, and			
			nal injury, death, property damage or loss			
resulting there from, and						
		ally able to participate in this	activity, and that my personal equipment			
	ny use in this activity, and	.1 011 1 1.1				
		i must be followed and that at	t all times the sole responsibility for			
personal safety remains 5) I will immediately re		and notify the nearest offici	al (HF staff), if at any time I sense or			
	zard or unsafe condition or if I f					
emotional or mental fitr		oor that I have emperioneed at	ij deterioration in my physical,			
		, my heirs, assigns, personal r	representatives and next of kin, that my			
participation in this acti	vity and execution of this docur	nent constitutes:				
	MPTION OF ALL RISKS asso					
			ation of injuries caused by negligent			
			therewith or participating therein, and			
	L RELEASE AND WAIVER O					
			rality of the foregoing, its officers, s, owners and/ or lessors of the premises			
			OMPANY), of and from with the respect			
			g from the negligence, or negligent			
rescue of or by the fores			,			
		NY for any loss, injury, costs	or damages of any form or type,			
	ising, and whether directly or in					
			COMPANY, and each of them, from any			
			hatsoever, they may incur due to any			
		e claim is based on the neglig	gence or the gross negligence of the			
COMPANY or otherwis	se. OOCUMENT THOROUGHLY.					
			ES, ASSUMPTIONS, WAIVER AND			
			ARTICIPATION IN THIS ACTIVITY.			

I UNDERSTAND THAT BY SIGNING THIS DOCUMENT I GIVE UP SUBSTANTIAL LEGAL RIGHTS I WOULD

Signature of Parent/Guardian:

OTHERWISE HAVE. I SIGN THIS DOCUMENT VOLUNTARILY AND WITHOUT INDUCEMENT.

Date: _



Child Guided Dogsledding Excursions Waiver

If you wish to rece	eive updates r	egarding Hali	ourton Forest please provide your email below:	
Medical History: the Dog Sled Tour		te if there is a	ny medical condition that you are aware of that may affect your health	during
Heart Condition:	NO	YES	Explanation:	
Epilepsy:	NO	YES —	Explanation:	
Asthma:	NO	YES	Explanation:	
Allergies:	NO	YES	Explanation:	
Other:	NO	YES	Explanation:	
have a safe 2. Participan 3. Any failur the tour w 4. Tours vary 5. Guides wi when appl 6. Guests are 7. Parents are for winter 8. Haliburtor guest or hi	r Forest & Wite and enjoyable and enjoyable agree to follow in ithout refund. If it is in length, deal have the auticable. If reminded the responsible conditions. In Forest & Wite Family a sigher family a s	epending on contact dogs are not for their child	ons and directions of the guides. /or the abuse of equipment or dogs will result in an immediate expulsion on the due to weather or other unforeseen factors. Rain checks will be machines and must be treated accordingly. ren and must ensure that these are prepared and equipped/dressed approve Ltd. shall not be held liable for any property damage or personal injude participation in a dogsledding tour, the use of Haliburton Forest and er reason whatsoever.	on from oe offered ropriately ury to the
I have read and un	derstand the a	above condition	ns and rules and will accept and comply with them.	
Child's Date of B	irth:		Child's Age:	
Signature of Pare	ent/Guardian	ı :	Date:	
Signature of Hali	hurtan Fara	st Staff.		