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RELEASE OF CLAIMS AND WAIVER OF LIABILITY FORM

BETWEEN: ***THE STITTSVILLE VILLAGE ASSOCIATION***

AND:

PARTICIPANTS IN THE PARADE OF LIGHTS

IN RESPECT TO: ***PARADE OF LIGHTS***

TO BE HELD AT: STITTSVILLE MAIN STREET between HAZELDEAN ROAD and ABBOTT STREET

ON: SATURDAY, 30 November, 2019 FROM 5:00 PM. TO 8:30 PM

Please read carefully before signing

As a condition of participating in the Parade of Lights, I or the participating organization (*I/Organization*) agree to the following:

- While participating in the event, *I/Organization* will refrain from engaging in activities or conduct that could cause property damage or harm to themselves or others.
- *I/Organization* agree not to engage in any unlawful activity and hereby agree to conduct *myself/Organization* in a manner that would not violate any Federal, Provincial or Municipal law.
- *I/Organization* agree to indemnify and hold harmless the Stittsville Village Association liable from all claims, demands, causes of action, loss, costs or damages that the Stittsville Village Association may suffer, incur or be liable for in relation to any injury *I/Organization* may suffer or cause to others in connection with *my/Organization's* negligence while participating in the event identified above.
- *I/Organization* hereby release, waive, and discharge the Stittsville Village Association from all liability to *my/Organization's* heirs, executors, administrators, and assigns for all loss or damage and any claims or demands for such loss or damage on account of injury to person or property.

I am the full age of 18 years. I/Organization am aware of the nature and effect of the **RELEASE OF ALL CLAIMS AND WAIVER OF LIABILITY FORM** that I/Organization am signing.

I/Organization execute this release and waiver of liability agreement freely and without any compulsion on the part of the Stittsville Village Association. I/Organization acknowledge to having read this entire agreement prior to having signed it. Intending to be legally bound, I/Organization have signed this **RELEASE AND WAIVER OF LIABILITY** this _____ day of 2019.

WARNING: BY SIGNING THIS FORM, I/ORGANIZATION ACKNOWLEDGE HAVING READ, UNDERSTOOD AND AGREE TO THE ABOVE CONDITIONS, RELEASE AND WAIVER.

Print your name

Signature

Telephone Number

Name of Organization

Address of I/Organization

Witness, print your name

Signature of Witness Date

Witness Signed