RELEASE

10:	515 Portage Avenue Winnipeg, MB R3B 2E9	
FROM:	(Name)	Home Phone: ()
	(Address)	
	AN IMPORTANT DOCUMENT	. YOU MUST CAREFULLY READ TI

THIS IS AN IMPORTANT DOCUMENT. YOU MUST CAREFULLY READ THE ENTIRE DOCUMENT BEFORE SIGNING IT. IF YOU DO NOT UNDERSTAND ANY PART OF IT YOU SHOULD CONTACT YOUR LAWYER FOR FURTHER INFORMATION. BY SIGNING THIS RELEASE YOU ARE GIVING UP CERTAIN OF YOUR LEGAL RIGHTS.

	1.	In consideration	of my par	ticipating in the	
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[insert full description of activity] ("Activity"), I agree to the following terms and conditions:

- (a) I hereby release and forever discharge The University of Winnipeg and its sponsors, and their respective subsidiaries, parent companies, related companies, affiliates, officers, regents, directors, employees, suppliers, agents, representatives, volunteers and contractors (collectively referred to as the "Releasees") from any and all manner of actions, causes of action, suits, debts, dues, accounts, bonds, covenants, contracts, claims and/or demands whatsoever which I, my heirs, executors, administrators, personal representatives, successors or assigns have or may hereafter have, arising in any manner out of my participation in the Activity including, without limitation, participation in or as a spectator of any other related or unrelated event.
- (b) I hereby release and forever discharge the Releasees from any and all liability, and all manner of action, causes of action, suits, debts, claims and/or demands whatsoever which I, my heirs, executors, administrators, personal representatives, successors or assigns may now or hereafter have, for any and all loss, damage, misfortune, accident, expense and cost that I, my heirs, executors, administrators, personal representatives, successors or assigns may incur, sustain and/or suffer, including but not limited to all bodily injuries, death and property damage, whether caused by the negligence of the Releasees, or any of them, and/or otherwise arising in any way out of my participation in the Activity, including without limitation, participation in or as a spectator of any other related or unrelated event.

- (c) I hereby assume full responsibility for any and all risk of bodily injury and/or death to me and/or property damage, due to the negligence of the Releasees and/or otherwise, arising in any manner from my participation in the Activity, including without limitation, participation in or as a spectator of any other related or unrelated event.
- (d) I do hereby release the Releasees from any breach of any statutory or other duty of care including any duty of care under the Occupiers Liability Act C.C.S.M. c.08.
- 2. I hereby expressly agree that this document is intended to be as broad and inclusive as is permitted by the law of the Province of Manitoba and that if any portion thereof is held invalid, that the balance shall, notwithstanding, continue in full legal force and effect.

I CONFIRM THAT I HAVE FULLY READ AND UNDERSTOOD ALL PARTS OF THIS DOCUMENT AND SIGNED IT VOLUNTARILY AND FURTHER ACKNOWLEDGE AND AGREE THAT NO REPRESENTATIONS, STATEMENTS OR INDUCEMENTS HAVE BEEN MADE TO ME OTHER THAN AS SET OUT IN THIS DOCUMENT.

IN WITNESS WHEREOF I have signed this Release.

DATED:	
SIGNED BY in the presence of:	
Signature of Witness)))
(You must have another person witness your signature and fill in this half of the form.)) Name:))
Name of Witness	
Address of Witness	
Occupation of Witness)
SIGNATURE OF PARENT OR GUARDIAN IF PARTICIPANT IS UNDER 18 YEARS	
Signature of Parent or Guardian	