



Encouraging the appreciation, study, and conservation of all components of the natural world.

Waiver and Release

Note: By signing this document you will waive certain legal rights. Please read carefully before signing.

Field Trip Leaders: Please return completed forms to Nature Calgary PO Box 981, Calgary AB T2P 2K4 or submit directly to a Nature Calgary Board Director.

To: NATURE CALGARY (also known as the CALGARY FIELD NATURALISTS' SOCIETY)

I hereby acknowledge:

1. That I am fully aware of the risks associated with participation in the following activity (**trip leader please circle as applicable**): nature walk/hike, habitat restoration (e.g., litter clean-up, invasive species removal), other: _____ on date: _____.
2. That I have freely accepted responsibility for accidents to myself arising from hazards and risks which could include but are not exclusively: steep, uneven, slippery or jagged terrain; insects, dangerous plants and animals; sudden extreme weather conditions; forest deadfalls; tree stumps; holes and depressions below the snow or ground surface; slippery ice; thin ice on frozen creeks, lakes and fens; cold water; dense bush; and poor trails.
3. I recognize and acknowledge that the following events are my responsibility: inappropriate clothing; inadequate physical fitness or health; not obeying directions of the hike or activity coordinator; intentionally separating from the group activity; and failure to exercise good judgment or pay due care and attention.
4. That I hereby waive any claim I may have against the Calgary Field Naturalists' Society and any of its directors, executive members or trip leaders and release them from all liability for any damages, loss of income, costs, expenses, or other injury of any kind whatsoever arising out of injuries or damages sustained by me as a result of my participation in this activity.

I acknowledge that this waiver and release will be binding upon myself, my family, heirs, executors, administrators, assigns, and successors.

Signed at _____, on the _____ day of _____ 200__ in the presence of: _____
Witness

	Name (printed)	Phone	Email	Signature	Member Y/N
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