

INTER VARSITY

GENERAL WAIVER

I, _____, release Inter-Varsity
(Print first and last name)

Christian Fellowship of Canada, Pioneer Camps and Circle Square Ranches, their trustees, directors, corporation members, staff and agents from any loss, personal injury, accident, misfortune or damage to his or her property, with the understanding that reasonable precautions shall be taken to ensure the health and safety of the above named participant. Each participant must be covered by a provincial medical plan or equivalent medical insurance.

Signed _____ Date _____

If the participant is under age 18, (Alberta, Manitoba, Ontario, PEI, Quebec, Saskatchewan), or under age 19 (British Columbia, New Brunswick, Newfoundland/Labrador, Nova Scotia, Northwest Territories, Nunavut, Yukon), the waiver must be signed by a legal guardian.

Name of Legal Guardian: _____
(Print first and last name)

Signed _____ Date _____