

PO Box 880, Stettler AB ToC 2L0 admin@stettlerhospice.org www.stettlerhospice.org



Liability Waiver

harmless from any and all liability (personal, physical and/or financial) related to the participation in the Hike for Hospice awareness and fundraising event to be held in the town of Stettler in the province of Alberta. This event is scheduled to

____, hereby agree to indemnify and hold the Stettler Hospice Society

take place on Sunday, May 2, 2021.	SIGNATURE:
	elease Agreement notograph/Video/Audio
right to take photographs, videotape, or take digi	that the Stettler Hospice Society and its employees or agents have the ital recordings of me during the 2021 Hike for Hospice to be held May 2, urther consent that my name and identity may be revealed therein or
	mployees, or agents to exhibit this work in print or electronic form all promotional and advertising purposes. I waive any rights, claims, or tity or likeness in whatever media used.
I understand that there will be no financial or oth recordings or photographs of me.	ner remuneration for recording or photographing me, or for distributing
•	ry is not responsible for any expense or liability incurred as a result of ng, including medical expenses due to any injury incurred as a result.
I represent that I am at least 18 years of age, or a the foregoing statement, and am competent to e	am signing on behalf of my child or ward, and have read and understand execute this agreement.
Name (please print):	Date:
Name(s) of Child(ren) (if signing on behalf of):	
- -	
Address:	Phone:
City:	Email:
Postal Code:	SIGNATURE: