United States Canoe Association

★ Competition ★ Cruising ★ Conservation ★ Camping ★ Camaraderie

AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY ****READ BEFORE SIGNING****

Name of Club:	Annual Coverage Date:
In consideration of being allowed to participate in any way is events and activities, the undersigned acknowledges, appre	in the UNITED STATES CANOE ASSOCIATION athletic sports program, related sciates, and agrees that:
The risk of injury from the activities involved in this program is sign equipment, and personal discipline may reduce this risk, the risk of	ificant, including the potential for permanent paralysis and death; and while particular rules, serious injury does exist; and,
	to directly or indirectly arising out of, contributed to, by or resulting from an outbreak of the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is tion or variation thereof;
I knowingly and freely assume all such risks, both known and unk responsibility for my participation; and	nown, even if arising from the negligence of the releasees or others and assume full
	d conditions for participation. If, however, I observe any unusual or significant hazard during on and bring such hazard to the attention of the nearest official immediately; and,
I, for myself and on behalf of my heirs, assigns, personal rep UNITED STATES CANOE ASSOCIATION and	presentatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the
	and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if ent ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or LIGENCE OF THE RELEASEES OR OTHERWISE.
I acknowledge that I am aware of the safety rules and reg safety, and that I have read the USCA sanctioning guidelin	ulations applicable to this event including the use of life jackets and lightning es and will attend the pre-event/pre-race meeting.
	en of me in my participation in and attendance at this event, and hereby freely agree to in the reporting of this race, and/or in the promotion of this event, its location, other
rights by signing it, and sign it freely and voluntarily withour loss of taste (symptoms of COVID-19).	agreement, fully understand its terms, understand that I have given up substantial out any inducement. And, to the best of my knowledge I do not have a fever, cough fill in the information numbered 1-7 including emergency contact.)
\ <u></u>	(Please print legibly)
x	1. Address:
(Participant's Signature) 5.	2. City:
	3. State/Zip Code:
	4. Date signed:
(Participant's full name, Please PRINT)	*U*S*C*A*
6. Emergency Contact Person for this participant:	
Emergency Contact Person for this participant: Emergency contact Phone Number: Cell:	Home:
EMERGENCY CONTACT PERSON CANNO	T BE A PARTICIPANT IN THE RACE OR EVENT.
Fill in form above for participants under a	ge 18. Parent/Guardian is to sign and complete the form below.
participant, do consent and agree to his/her release as provided ab to indemnify and hold harmless the Releasees from any and all liab	ME OF REGISTRATION) This is to certify that I, as parent/guardian with legal responsibility for this love, of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree illities incident to my minor child's involvement or participation in these programs as provided S, to the fullest extent permitted by law. I further agree to the photographic and video release

(Date signed by parent/guardian)

(Parent/Guardian Signature)