

Strathcona Wilderness Centre, 52535 Range Road 212, Ardrossan, AB
Mailing address: 2001 Sherwood Drive, Sherwood Park, AB T8A 3W7

Phone 780-922-3939 Fax 780-922-6415

Date _____
(YYYY-MM-DD)

Last Name _____ (Print) First Name _____ (Print)

Address _____
Street and Number City/Town Province Postal Code

Contact Phone Number _____ Email Address _____

Check a pass type

Full season Spring season Youth Club Adult/Senior Family

Would you like to receive our SWC newsletter? Please provide an e-mail or fax number _____

Purchasing a family pass? Additional family members can be included here.

Completed by staff

Member 1 _____	Under 18? <input type="checkbox"/>	_____
Name (last, first, initial)		Customer #
Member 2 _____	Under 18? <input type="checkbox"/>	_____
Name (last, first, initial)		Customer #
Member 3 _____	Under 18? <input type="checkbox"/>	_____
Name (last, first, initial)		Customer #
Member 4 _____	Under 18? <input type="checkbox"/>	_____
Name (last, first, initial)		Customer #

All registrants 18 years of age and older must read and sign the following:

Cross Country Skiers' Responsibility Code

- Always stay in control.
- Observe all signs and posted warnings.
- Keep off all closed trails.
- Always ski to the right when passing on-coming skiers and when skiing a double track.
- On a two-way trail, descending skiers always have the right-of-way.
- Don't litter. If you pack it in pack it out...and respect private property.
- Yield the track to faster skiers or skiers saying "Track".
- Stay clear of snow grooming equipment and personnel.
- Report all accidents.

I acknowledge that I have read and understand the Cross Country Skiers' Responsibility Code and agree to abide by it.

Signature _____ Date (yyyy-mm-dd) _____ Signature (additional registrant 18 years or older) _____ Date (yyyy-mm-dd) _____

Collection and use of personal information

Personal information is collected under the authority of section 33(c) of the *Freedom of Information and Protection of Privacy Act* and will be used to manage and administer your Strathcona County recreation program account, including program registration, memberships or rentals. If you have questions regarding the collection, use or disclosure of this information contact Manager of Finance & Business Operations at 780-467-2211.

Office use only

Date processed _____ All signatures collected? Card Printed? CSR initials _____

Cross Country Ski Pass - Registration

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Please **read** the following **Release of Liability, Waiver of Claims, Assumption of Risks and Indemnification Agreement** carefully. Must be read and signed by all registrants 18 years of age and older.

Release of Liability, Waiver of Claims, Assumption of Risks and Indemnification Agreement

I, the undersigned, am aware that cross country skiing, being a wilderness activity, involves inherent risks, dangers and hazards, including, but not limited to, personal injury, death or property loss caused by skiing, or through collisions with natural or man-made objects or other skiers. Trail conditions vary constantly as a result of weather changes and skiers' use. In addition, a number of other obstacles and hazards, including ice, variations in terrain, moguls, rocks, forest growth and debris, and other obstacles and hazards including other skiers also exist throughout the area. I am aware that snow grooming may be in process and I must stay clear of this equipment. I further understand that, while particular rules, equipment and personal discipline may reduce the risk, the risk of serious injury, loss or death does exist. **I freely accept and assume all such risks, dangers and hazards and possibility of personal injury, death, property damage or loss resulting therefrom.**

In signing this form, I understand that the Strathcona Wilderness Centre does not provide rescue services, and therefore I am responsible for my own safety. I acknowledge that I have read Strathcona Wilderness Centre Cross Country Skiers' Responsibility Code and, being aware of the inherent dangers, I elect to use the equipment and facilities provided by the Strathcona Wilderness Centre at my own risk.

In consideration of Strathcona County permitting me to participate in cross-country skiing activities at the Strathcona Wilderness Centre, I agree only to use the facilities in compliance with all rules, regulations and policies as they may exist from time to time, and I AGREE AS FOLLOWS:

TO WAIVE ANY AND ALL CLAIMS that I have or may have in the future against Strathcona County, its Councillors, officers, employees, agents and representatives (all of whom are hereinafter collectively referred to as "the Releasees");

TO RELEASE THE RELEASEES from any and all liability for any loss, damage, injury or expense that I may suffer or that my next of kin or legal representatives may suffer as a result of my use of the equipment and facilities of the Strathcona Wilderness Centre, due to any cause whatsoever, INCLUDING NEGLIGENCE ON THE PART OF THE RELEASEES;

TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability for any property damage, personal injury to any third party or other financial loss or expense, including legal expenses and costs on a solicitor-and-his-own-client full indemnity basis, resulting from the use of the equipment and facilities of the Strathcona Wilderness Centre by me; and

THAT THIS AGREEMENT will be effective and binding upon my heirs, next of kin, executors, administrators and assigns in the event of my death.

I have read this Release of Liability, Waiver of Claims, Assumption of Risks and Indemnification Agreement and fully understand its terms. I understand that I have given up substantial legal rights by signing it, including the right to sue in the event of injury, and I sign it freely and voluntarily without any inducement.

DATED this _____ day of _____, AD 20__.

Signature

Witness

Additional registrant 18 years of age or older:

DATED this _____ day of _____, AD 20__.

Signature (yyyy-mm-dd)

Witness