

**TENNESSEE VALLEY CANOE CLUB  
WAIVER OF LIABILITY FOR ALL CLUB OUTDOOR SPORT ACTIVITIES**

Activity \_\_\_\_\_ Date \_\_\_\_\_ Activity Leader \_\_\_\_\_

**WAIVER OF LIABILITY:** I UNDERSTAND THAT KAYAKING, CANOEING AND OTHER OUTDOOR SPORTS MAY BE DANGEROUS AND COULD RESULT IN SERIOUS INJURY OR FATALITY. I REPRESENT THAT I AM PHYSICALLY CAPABLE OF PARTICIPATING IN THESE SPORTS. I ACKNOWLEDGE THAT I AM SOLELY RESPONSIBLE FOR MY SAFETY AND/OR THAT OF MY MINOR CHILD(REN). I ASSUME ANY AND ALL RISKS OF INJURY OR FATALITY FOR MY SELF OR MY MINOR(S). I HEREBY RELEASE THE TENNESSEE VALLEY CANOE CLUB, INC., ALL ITS MEMBERS, OFFICERS AND DIRECTORS AND/OR ANY OTHER ORGANIZATIONS OR ENTITIES AFFILIATED WITH THEM FROM ANY AND ALL CLAIMS FOR PERSONAL INJURY, FATALITY OR PROPERTY DAMAGE WHICH MAY ARISE FROM MY PARTICIPATION IN ANY ACTIVITY WITH THE CLUB OR ITS MEMBERS OR ANY TRANSPORTATION RELATED TO THE ACTIVITY.

I UNDERSTAND THERE WILL BE A SAFETY TALK GIVEN BY THE ACTIVITY LEADER AND I WILL LISTEN TO IT.

**I CERTIFY THAT I HAVE READ THIS WAIVER OF LIABILITY AND AGREE TO IT'S TERMS:**

Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____
Signature _____	Printed Name _____

**PARENTS OF MINORS**

I give permission for the named minor to participate in the sanctioned activities of the TVCC. I waive the rights described above with respect to the named minor, and I agree to indemnify and hold harmless all parties named above from any claims arising from the participation of the named minor.

Signature _____	Minor's Name _____
Signature _____	Minor's Name _____
Signature _____	Minor's Name _____
Signature _____	Minor's Name _____
Signature _____	Minor's Name _____

**Activity Leader is to mail each form(s) to: TVCC; PO Box 11582; Chattanooga, TN 37401 within 1 week after the event takes place.**

**The club Secretary will keep this waiver for 2 years as part of the club records.**