Recreation Services
Vaughan Sports Leagues
Permission, Indemnity, & Assumption of Risk

1. **I agree** that by registering for this City of Vaughan Program, I will be bound by all of the terms and conditions of the City with respect to such programs, including those contained in the COVID-19 Acknowledgement, Release and Indemnity Agreement (the "Agreement") found below.

    Initials _____

2. **I agree** to review the content of the Agreement prior to registering in any program, in particular with respect to provisions intended to control the spread of the COVID-19 pandemic and penalties for non-compliance with all City provisions.

    Initials _____

3. **I agree** that if I do not consent to any of its terms or conditions, I will not register for any City of Vaughan programs. I also hereby grant permission to the City of Vaughan or its representative to contact 911 in order to make arrangements for the transportation of any registrants named on this form to a local doctor or hospital for medical treatment if deemed necessary by the City.

    Initials _____

4. **I hereby release and discharge and agree** to indemnify and save harmless the City of Vaughan from and against all claims or proceedings in respect of any costs/losses incurred, and damage/injury experienced as a result of, or arising out of my/our registration and/or attendance in this program.

    Initials _____

5. By registering in this program. **I agree** to having any required emergency and/or medical procedures administered to any registrants. On behalf of myself, I accept all inherent risks associated with the program, whatever they may be. The City of Vaughan reserves the right to validate account information including but not limited to: client name, date of birth, address, and residency status. Valid photo ID proof may be requested for account verification.

    Initials _____

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Initials _____

Name: _____

Address: _____ Postal Code: _____

Date of Birth: _____ Date: _____

Signature: _____