Boat	#
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check one

Racer___TC___

United States Canoe Association

★ Competition ★ Cruising ★ Conservation ★ Camping ★ Camaraderie

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

Name of Event:	Date(s) of Event:
In consideration of being allowed to participate in any way is related events and activities, the undersigned acknowledges,	n the UNITED STATES CANOE ASSOCIATION athletic sports program, appreciates, and agrees that:
The risk of injury from the activities involved in this program is sig equipment, and personal discipline may reduce this risk, the risk of	nificant, including the potential for permanent paralysis and death; and while particular rules, serious injury does exist; and,
	o directly or indirectly arising out of, contributed to, by or resulting from an outbreak of ne virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is ation or variation thereof;
I knowingly and freely assume all such risks, both known and unresponsibility for my participation; and	known, even if arising from the negligence of the releasees or others and assume full
	conditions for participation. If, however, I observe any unusual or significant hazard during my 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 the UNITED STATES CANOE ASSOCIATION and	presentatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS
advertisers, and, if applicable, owners and lessors of premise	agents, and/or employees, other participants, sponsoring agencies, sponsors, es used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND o person or property, WHETHER ARISING FROM THE NEGLIGENCE OF
I acknowledge that I am aware of the safety rules and regusafety, and that I have read the USCA sanctioning guideling	ulations applicable to this event including the use of life jackets and lightning nes 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 s 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 withe or 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,
(All participants are to sign and completely f	ill in the information numbered 1-7 including emergency contact.)
	(Please print legibly)
X	1. Address:
(Participant's Signature)	2. City:
	3. State/Zip Code:
5	4. Date signed:
(Participant's full name, Please PRINT)	*U*S*C*A*
6. Emergency Contact Person for this participant:	
7. Emergency contact Phone Number: Cell:	Home:
	OT 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.
responsibility for this participant, do consent and agree to his/her re release and agree to indemnify and hold harmless the Releasees from	B AT THE TIME OF REGISTRATION) This is to certify that I, as parent/guardian with legal lease as provided above, of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I m any and all liabilities incident to my minor child's involvement or participation in these GLIGENCE OF THE RELEASEES, to the fullest extent permitted by law. I further agree to the
(Parent/Guardian Signature)	(Date signed by parent/guardian)