GANARASKA HIKING TRAIL ASSOCIATION INC.

Trail Maintenance - Waiver of Liability & Assumption of Risk

We, the undersigned, acknowledge that the activity in which we are participating involves risks. In consideration of being permitted to participate, we hereby assume any and all such risks and hereby release and discharge the Ganaraska Hiking Trail Association Inc, its officers, directors and volunteers, the activity leader, the owner of such lands we may cross or find ourselves upon and our fellow hikers, their successors and assigns from any and all claims for loss or damage directly or indirectly arising as a result of our participation in this activity. We confirm that we are aware of the nature of the activity, the duration and the degree of difficulty and that we are properly equipped and physically able to participate. We have no medical conditions that might preclude our participation. Each adult accepts full responsibility for all persons under 18 that may be in their care.

Work Party Leader:_____ Location: _____Activity: _____

If initialled below, I confirm that I am bringing my own chainsaw which is in good repair, as well as any required safety gear, and that I will follow all safety instructions documented in the Ganaraska Hiking Trail Association Inc.'s Chainsaw Policy.

Name (please print)	Chainsawer Pls initial	Signature	Cell Phone #	Emergency Contact	Emergency Contact Phone #