Berkeley Paddling and Rowing Club (BPRC) GUEST WAIVER

Name	
Address	
City, State, Zip	
Phone	Email
Guest Of / Mentor /	Event
I have read and agree to a aware that there are certarisks and will hold BPRC connection with my use of as a release and an assumaccompanying me. I also equipment that is owned subsidiaries, affiliates, officiand all claims, demands, and warranty, strict liability, compensatory or punitive of the provided BPRC was address. Pursuant to CA emailing me all meeting reads.	abide by the BPRC Membership Rules as posted on the BPRC Bulletin Board. I am ain risks involved in sculling and paddling at Berkeley Aquatic Park. I assume those harmless from any liability, claims or demands of any kind which may arise in BPRC facilities, boats, weight room, and related equipment. This agreement will serve uption of risk for my heirs and all members of my family including any minors agree to reimburse BPRC for any loss or damage that I may cause to any boat or other by BPRC. Participant releases and forever discharges the City of Berkeley, its divisions, causes, agents, employees, and the heirs, executors or assigns of any of the foregoing, from any ad causes of action of every kind, known or unknown, whether based in tort, contract, breach negligence or any other legal theory of recovery, and whether for general, special, lamages, arising out of or in any way related to use of the Main Lagoon at Aquatic Park. Atth a valid and reliable email address. I agree to notify BPRC of any change in my email Corporations Code § 20, I hereby consent to BPRC's use of this address for purposes of notices, ballots or other official member communications. I understand I may revoke this last submit in writing for BPRC's consideration a reasonable alternative method of nunications.
Signature	Date
this participant, do consent assigns, and next of kin, I i incident to my minor child	NDER AGE 18 This is to certify that I, as parent/legal guardian with legal responsibility for and agree to his/her release as provided above, of all the Releasees, and, for myself, my heirs, elease and agree to indemnify and hold harmless the Releasees from any and all liabilities is involvement or participation in these programs as provided above, EVEN IF ARISING OF THE RELEASEES, to the fullest extent permitted by law. I further agree to the ease set forth above.
Parent/Legal Guardian Nar	ne & Address: (PLEASE PRINT)
	Emergency Contact #
Address:	
Signature:	Date:
Mentoring Dates:	