



LETTER OF WAIVER AND INDEMNITY

Letter of Waiver and Indemnity to Singapore Canoe Federation (SCF)

Activity:			
Start Date:		End Date:	
Venue:			

Dear Sir/Madam,

1. I, _____ (name), NRIC/FIN/Passport No. _____ (last 4 alphanumeric characters, e.g. XXXXX567A), wish to participate in the Activity.
2. I warrant that I am in good health and have no physical condition that would endanger my life while participating in the Activity.
3. Whilst all reasonable precautions will be taken by SCF and/or its agent(s) to ensure the safety of participants, I understand that participation in the Activity may carry risks, including but not limited to risks associated with being exposed to and contracting COVID-19, and, where the Activity involves travel out of Singapore, any risks associated with such travel, including but not limited to risks associated with being exposed to and contracting COVID-19 in the destination country.
4. I consent to taking part in the Activity as a participant and understand that I do so at my own risk.
5. I confirm and agree that I will not hold SCF and/or its agent(s) liable by me for any personal injury or death arising from my participation in the Activity or for any loss of or damage to my property arising from my participation in the Activity, except for such injury or death that is caused directly by the gross negligence of SCF or its agent(s).
6. In consideration of SCF allowing me to participate in the Activity, I undertake that if, in the course of my participation in the Activity, I deliberately or negligently cause any injury (whether fatal or otherwise) to any person or any damage to or loss of any property belonging to any person, I shall indemnify SCF if such person makes claims or takes action against SCF or if SCF has to pay for any costs or expenses arising therefrom.



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7. I represent that I am at least 21 years of age or that, if I am under 21, my parent / legal guardian has signed on Page 3.

Yours faithfully,

Signature of Participant

Date



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Parental Consent (To be completed by Parent / Guardian)

I, _____(name of parent / guardian), NRIC/FIN/Passport No.
_____(last 4 alphanumeric characters, e.g. XXXXX567A), am the parent / guardian of the
abovenamed _____(name of child / ward). I consent to my
child / ward taking part in the Activity, and I agree to the waiver and indemnity that are set out in this
document.

Signature of Parent / Guardian

Date