



The Golf Dome

1205 Wilkes Avenue
Winnipeg, Manitoba
R3P1B9

Phone 204-489-7776

Fax 204-488-3185

Email: Rentals@golfdome.ca

Release and Waiver from Liability

Name _____
Address _____
City _____ Postal Code _____ Email _____
Telephone (H) _____ (W) _____ (F) _____
Date of Birth (dd/mm/yy) _____

If you are under 18 years of age, you must have your parent/guardian sign this form

Comments _____

The Undersigned expressly acknowledges that sports and similar activities involve risk of physical injury greater than those encountered in daily life, and by participating in sports and other activities, participants acknowledge and assume the risk inherent therein. The Golf Dome accepts no responsibility, and shall not be held liable for any injury, illness, death, damage, loss, accident, expense, delay or other irregularity resulting from the participation in any activity or use of any of the facilities at The Golf Dome.

In consideration of being permitted to enter and use the facilities at The Golf Dome, the undersigned hereby releases, waives, discharges and covenants not to sue The Golf Dome, its officers and directors, employees, agents, servants and/or assigns for any and all damage and any claim or demand therefore on account of injury or resulting death of the undersigned, of damage to property whether caused by the negligence of The Golf Dome or otherwise while the undersigned is in the facilities at The Golf Dome.

Additionally, the undersigned hereby authorizes The Golf Dome to utilize the undersigned's name and/or photographic or verbal representation by any media format (ie video taping, audio taped interview, photograph's etc.) In the promotions of programs or rentals of The Golf Dome.

Also the undersigned acknowledges the rules of participation and safety of The Golf Dome and agrees to follow all such rules.

Date (dd/mm/yy) _____

Printed Name _____

Signature _____

Declaration of Parent of Guardian

I consent to my child, named above, participating in The Golf Dome activities and I assume all risks arising from or in any way related to such participation. I therefore agree to waive any and all claims against, and to indemnify and hold harmless The Golf Dome, it's officers, directors, employees, agents, servants and/or assigns in connection with any claims made by or on the behalf of my child, named above, including legal costs. I certify that my child is in good physical and mental health. In case of a medical emergency, if I cannot be contacted directly, I hereby give permission to the physician selected by The Golf Dome to hospitalize, secure proper treatment for, and to order injections, transfusions, anaesthesia, or surgery for my child, as named above. **I acknowledge reading this declaration and the Release and Waiver from Liability and understand the conditions contained herein and agree to abide by all of the terms.**

Date (dd/mm/yy) _____

Printed Name _____

Signature (Parent or Guardian if under 18) _____

Relationship to Child _____