

INTER VARSITY

General Waiver

I, _____, release Inter-Varsity
(Print first and last name)

Christian Fellowship of Canada and InterVarsity Pioneer Camps and InterVarsity Circle Square Ranch Camps, its trustees, directors, corporation members, staff and agents from any loss, personal injury, accident, misfortune or damage to his or hers property, with the understanding that reasonable precautions shall be take to ensure the health and safety of the above named participant. Each participant must be covered by a provincial medical plan or equivalent medical insurance.

Signed _____ Date _____

If participant is under 18, (Alberta, Manitoba, Ontario, PEI, Quebec, and Saskatchewan) or under 19 (British Columbia, New Brunswick, Newfoundland/Labrador, Nova Scotia, Northwest Territories, Nunavut, and Yukon) then the waiver must by signed by legal guardian.

Name of Legal Guardian: _____
(Print first and last name)

Signed _____ Date _____