

NSWalks

Participant Agreement and Waiver

I acknowledge that the walk leader/host will:

- Take reasonable steps to make the walk safe for me by doing a risk assessment.
- Describe the route and any hazards to me before we start walking and will let me decide how far I want to walk.
- Ensure that all Walk Leaders/Hosts have done the NS Walks leader training course.
- Take reasonable steps to find a walk that works for everyone.

As participants and leaders/hosts we agree to respect each other.

As a walk participant (walker):

- I have completed the "Get active questionnaire" and have checked in with a healthcare professional if the form suggested I do so.
- I will tell the walk leader if I feel unwell while out on a walk.
- I will let a walk leader know if I am leaving the walk before it has ended.
- It is up to me to make sure I can do the walk safely.
- I understand that I come on the walk at my own risk.

Please print your full name in the space below:

I _____ understand that risks are involved in participating in programs or activities that involve physical activity, such as walking, that are beyond the control of Hike Nova Scotia. I certify that I am medically fit to participate without risk to myself. I affirm that I am aware of the nature of this activity, its distances, duration and degree of difficulty and that I am properly equipped and physically able to participate. I for myself, my heirs, executors, administrators and assigns release and forever discharge Hike Nova Scotia, its respective servants, agents, employees, sponsors, volunteers or walk leaders/hosts from any claims, demands, damages, actions, or cause of actions arising out of or in consequence of any loss, injury or damage to my person or property incurred while attending at or participating in the NS Walks walking program, notwithstanding any such loss, injury or damage that may have arisen by reason of the negligence of Hike Nova Scotia, its servants, agents, employees, sponsors, volunteers or walk leaders/hosts. By my signature hereon, I affirm that I have read and fully understand the terms, conditions, releases, waivers and assumptions above set forth.

Signature of Participant

Date signed

Your walk leader/host, fellow participants, or staff may wish to take pictures of the group during your walks. This will help us promote group walking and get others interested in joining in! These photos could then be used in our promotional or educational materials. I grant permission to Hike Nova Scotia to use still photographs or video footage of this participant for these purposes.

YES _____

NO _____

Signature of Participant

Date signed

