



ORILLIA CITY CENTRE  
50 ANDREW ST. S., SUITE 300  
ORILLIA, ON L3V 7T5

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## PARKS, RECREATION AND CULTURE DEPARTMENT

### WAIVER FOR CHILD/YOUTH USE

**RE: Rock Climbing Wall and Barnfield Point Recreation Centre,  
500 Atherley Road Orillia, Ontario.  
Rock Climbing Wall and Rotary Place,  
100 University Ave. Orillia, Ontario  
(Herein after the "Facility")**

**Last Name** \_\_\_\_\_ **First Name** \_\_\_\_\_

1. I hereby agree to read thoroughly this waiver and to clarify any information that I do not understand. →Please Initial  ←
2. I hereby acknowledge that my child or the child for which I am a legal guardian (hereinafter the "child"), whose name appears below is six years of age or older. →Please Initial  ←
3. I hereby acknowledge that the Orillia Parks and Recreation Department has taken reasonable steps to provide the appropriate equipment for the facility and to provide appropriately trained staff to supervise the use of the facility. →Please Initial  ←
4. I hereby acknowledge that my child or the child for which I am a legal guardian (hereinafter the "child"), whose name appears below, wishes to use the facility. →Please Initial  ←
5. I hereby acknowledge that despite the provision of appropriate facilities and trained staff by the Orillia Parks and Recreation Department the child will be exposed to dangers and personal injury arising from and inherent to the sport of Rock Climbing, including, but not limited to:
  - a) negligent misuse of the facility by the child;
  - b) negligent misuse of the facility by any other child or adult;
  - c) rope abrasion, entanglement and other activities on or near the climbing wall;
  - d) cuts, abrasions, or irritations resulting from skin contact with the climbing wall or related equipment;
  - e) personal health problems, physical conditions, or other personal areas of concern;
  - f) negligence or lack of adequate training of any person(s) who seek to assist with medical or other help either before or after injuries have occurred →Please Initial  ←
6. I hereby acknowledge that I am responsible for allowing the child to use the facility and that such use is purely voluntary. I, therefore, accept all legal and financial responsibility for personal injuries or property damage incurred or caused by the child as a result of using the facility. →Please Initial  ←
7. I hereby fully release the City, its officers, agents and employees from all liability for any personal injuries or property damage incurred or caused by the child using the facility, where the City, its officers, agents and employees have not been found to be negligent. →Please Initial  ←
8. In consideration for the child using the facility I hereby agree to indemnify, fully, the City for any award of damages including legal costs arising from any personal injury or property damage incurred or caused by the child as a result of using the facility where the City, its officers, agents and employees have not been found to be negligent. →Please Initial  ←
9. By signing this waiver, I hereby acknowledge that I have read and understand all of the terms of this waiver.

Name of Adult Parent /Legal Guardian: \_\_\_\_\_  
(Please Print)

Address of Adult Parent/Legal Guardian: \_\_\_\_\_

Signature of Adult Parent/Legal Guardian: \_\_\_\_\_

Date: \_\_\_\_\_