

Dawn Sanctuary Fellowship CANADA DISCLAIMER

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

This Waiver of Liability (the “Waiver”) is executed on this ____ day of _____, 20__, by _____ (the “Participant”) in favor of Dawn Sanctuary Fellowship, a non-profit corporation organized and existing under the laws of Canada, and its respective directors, officers, employees, volunteers, agents, shareholders, affiliates, successors, contractors, and assigns (collectively, “Dawn Sanctuary Fellowship”). I attend and partake the rehabilitation program and its related activities organized by Dawn Sanctuary Fellowship voluntarily and I desire to partake as a participant and engage in the activities related to be the Participant as one being rehabilitated. I understand the nature of such rehabilitation and activities. In consideration for being the Participant at the program by Dawn Sanctuary Fellowship, I hereby freely and voluntarily, without duress, execute this Agreement under the following terms:

1. Wavier and Release: I, the Participant, release and forever discharge and hold harmless Dawn Sanctuary Fellowship and its respective shareholders, directors, officers, employees, volunteers, agents, affiliates, successors, contractors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from my partaking in the rehabilitation program and its related activities offered by Dawn Sanctuary Fellowship. I understand and acknowledge that this Waiver and Release discharges Dawn Sanctuary Fellowship from any liability or claim that I, the Participant, may have against Dawn Sanctuary Fellowship with respect to bodily injury, personal injury, illness, death, or property damage that may result from my activities and time spent at a Dawn Sanctuary Fellowship site. I understands that this Release discharges Dawn Sanctuary Fellowship from any liability or claim that I may have against Dawn Sanctuary Fellowship with respect to any bodily injury, personal injury, illness, death, or property damage that may result from my activities with Dawn Sanctuary Fellowship, whether causes by the negligence of Dawn Sanctuary Fellowship or its shareholders, directors, officers, employees, volunteers, agents, affiliates, successors, contractors and assigns or otherwise. I also understand that Dawn Sanctuary Fellowship not assume any responsibility for or obligation to provide financial assistance or other assistance to me, including but not limited to medical, health or disability insurance, in the event of injury, illness, death or property damage.

2. Insurance: I, the Participant, understand that Dawn Sanctuary Fellowship does not carry or maintain health, medical, or disability insurance for any Participant. I, the Participant, understand that I expressly waive any such claim for compensation or liability on the part of Dawn Sanctuary Fellowship beyond what may be offered voluntarily and freely by a representative of Dawn Sanctuary Fellowship, in its sole discretion, in the event of such injury or medical expense.

3. Medical Treatment: I hereby release and forever discharge Dawn Sanctuary Fellowship from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered to me in connection with an emergency during my time with Dawn Sanctuary Fellowship.

4. Assumption of Risk and Indemnification: I understand that my time with Dawn Sanctuary Fellowship may include activities that may be hazardous to me, including, but not limited to, construction activities, loading and unloading of heavy equipment and materials, and local transportation to and from various locations. I hereby expressly and specifically assume the risk of injury or harm in these activities and release Dawn Sanctuary Fellowship from all liability for injury, illness, death, or property damage resulting from my activities and my time at the Dawn Sanctuary Fellowship site. If I, or anyone on my behalf makes a claim against the Dawn Sanctuary Fellowship related to my partaking in the rehabilitation program and time at Dawn Sanctuary Fellowship, I agree to indemnify, save and hold harmless Dawn Sanctuary Fellowship from any claim, including without limitation, loss, liability, damage or cost which may occur as a result of any such claim.

5. Photographic Release: I grant and convey unto Dawn Sanctuary Fellowship all right, title, and interest in any and all photographic images and video or audio recordings made by Dawn Sanctuary Fellowship during my time at Dawn Sanctuary Fellowship site, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

6. Behaviors: I understand that my behavior at Dawn Sanctuary Fellowship must comply with all rules and regulations of onsite, and laws of British Columbia and laws of Canada.

7. Other: I expressly agree that this Waiver is intended to be as broad and inclusive as permitted by the laws of British Columbia and the laws of Canada, and that this Waiver shall be governed by and interpreted in accordance with the laws of British Columbia and laws of Canada. I agree that in the event that any clause or provision of this Waiver shall be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

THIS IS A VOLUNTARY RELEASE OF ALL CLAIMS BY YOU. PLEASE READ CAREFULLY BEFORE SIGNING.

Participant Name (please print) : _____

Participant Signature: _____

Today's Date: - _____

Participant Address: _____

Phone number where you are most easy to reach: _____

Email: _____