



ONE FAMILY FUND Waiver Form

In signing this Waiver and release, I understand the intent thereof, and I hereby agree to release from responsibility and waive all claims against the One Family Fund Organization, the organizers of the Dragon Boat Israel Festival, corporate sponsors, cooperating organizations, and any other parties connected with this event in any way, or person, singly or collectively, for any blame or liability, demand, injury, harm, loss of property, or damage I might sustain as a result of participation in the One Family Fund Dragon Boat Israel experience and activities associated therewith. I fully accept and assume all risks and all responsibility for losses, costs and damages I incur as a result of my participation in this event. I certify that I have read this waiver, fully understood that I have given up substantial rights by signing this waiver and have signed this waiver freely of my own will and accord. I confirm that the information provided to be correct. I agree that I will adhere to the rules and regulations set forth by One Family Fund for the Dragon Boat Israel Festival.

I give full permission for the use of my name and photograph in connection with this event.

Print Participant Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Signature of Participant  
or parent or legal guardian: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE RETURN BY SCANNING AND EMAILING TO [JENNIFER@ONEFAMILYFUND.CA](mailto:JENNIFER@ONEFAMILYFUND.CA)  
OR FAX TO 416-489-9864.