



# WRYM'S Rough Night Out

**FEB 16 – FEB 17**  
**9:00PM – 6:00AM**

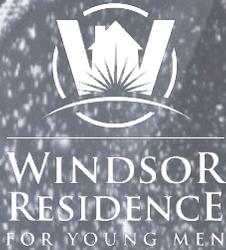
at the

**Windsor Residence for Young Men**

1505 Langlois Avenue | Windsor, ON N8X 4M3

or a location of your choice

**Participation Waiver**



By signing this Participation Waiver agreement, I, \_\_\_\_\_ (the participant) agrees to the following terms:

- 1) The participant hereby warrants that you are physically fit and able to participate in WRYM's Rough Night Out 2024 without any undue risk.
- 2) The Windsor Residence for Young Men maintains the right to refuse participation in WRYM's Rough Night Out 2024 if they foresee that participation would risk damage to any party.
- 3) In consideration of acceptance to participate in WRYM's Rough Night Out 2024, the participant hereby for yourself, your heirs, executors, administrators, successors, and assigns waive any present claims and claims to which you may become entitled for injury or damage or other liability regardless of cause and release the Windsor Residence for Young Men, sponsors, and all their employees and volunteers assisting in WRYM's Rough Night Out 2024 from any claims for damages or injury suffered by you as a result of your participation in or travelling to and from this event.
- 4) The participant agrees to abide by any pandemic restrictions placed on group activities at the time of WRYM's Rough Night Out 2024 and shall not take part in the event if you possess any symptoms of COVID19.
- 5) The participant agrees and understands that by signing using a digital signature, that all digital signatures are the legal equivalent of their manual/handwritten signature and the participant consents to being legally bound to this participant waiver.
- 6) The participant agrees that this waiver agreement shall remain in full force and take effect without change and that participation in WRYM's Rough Night Out 2024 is pursuant to the terms of the agreement.

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I accept the terms of my participation in WRYM's Rough Night Out 2024 as stated above.

Participant's First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

The Participation Waiver **must** be completed, signed, and emailed to Sue at [events@wrym.ca](mailto:events@wrym.ca) before your participation in WRYM's Rough Night 2024.

If you require more information, please email Sue at [events@wrym.ca](mailto:events@wrym.ca) or visit our website at [www.wrym.ca](http://www.wrym.ca)