West Florida Canoe Club
P.O. Box 10583
Pensacola, FL 32524-0583

TRIP NAME: _____ DATE: _____

CLUB STATEMENT OF INDIVIDUAL RESPONSIBILITY

I, the below named, desiring to join my fellow paddlers in the West Florida Canoe and Kayak Club (WFCKC) in a common adventure, banding together and sharing the risks, with each person taking full responsibility for the consequences of their actions, do hereby declare that I fully understand and accept the following facts of life on the water: Canoeing, kayaking or rafting exposes participants to various hazards.

Essential Eligibility Criteria:

- **Be able to manage all personal care and mobility independently or with the assistance of a companion who accompanies the participant.**
- **Be able to get in and out of a canoe/kayak independently or with the assistance of a companion.**
- **Be comfortable in the water including: floating on back independently with a properly fitted PFD, turning from face down to face up independently while wearing a properly fitted PFD, and holding breath under water.**
- **Be able to get out from under the watercraft independently in the event of a capsize.**
- **Be able to maintain a balanced, upright position when seated in a canoe/kayak, with adaptations if needed. **NOTE** No adaptations providing head or neck support will be accepted.**
- **At least one person in the canoe/kayak must have the ability to move it through the water in a stable manner**

No one but myself is responsible for my safety when I choose to challenge my capabilities by running a particular body of water.

I expect to assist my fellow paddlers to the best of my own personal skill and ability if they appear to need such assistance, but only so long as I can do so, in my own judgment without significant danger to myself. I further understand that this does not imply any legal duty for me to do so nor for anyone else to render such assistance to me.

NOW THEREFORE, INTENDING TO BE LEGALLY BOUND, I HEREBY WAIVE, for myself and for anyone else claiming through me my right to sue WFCKC, its officers, trip coordinators, or any of my fellow paddlers, for any injuries to my person or damage to my equipment which may occur during, in preparation for, or in transit to or from a WFCKC outing. This waiver applies to any negligent act or omission, and to any intentional act intended to promote safety and well being.

This waiver is given in the interest of permitting the WFCKC to exist and to serve the paddling community and to enable me and my fellow paddlers to feel free to donate their services to improving the sport and to help in training those less skilled than ourselves without fear of liability.

THIS WAIVER IS GVEN IN EXCHANGE FOR SIMILAR WAIVERS TO BE GRANTED ON MY BEHALF BY OTHER MEBMBERS OF THE WFCKC. Please sign and date waiver in order to validate membership.

Please sign, date, and include an emergency contact phone number.

Signature _____ Date_____ Tel _____