

CALEDON PFD LIBRARY LOAN PROJECT

RELEASE OF LIABILITY, WAIVER OF CLAIMS & INDEMNITY AGREEMENT

In consideration of the Town of Caledon and the Caledon Public Library providing me with a PFD, I hereby agree as follows:

1. I have received the “Personal Flotation Devices for Adults” and / or “Personal Flotation Devices for Children” information sheets and agree to review and follow those guidelines.
2. I acknowledge that I have inspected the PFD(s) borrowed for any damage and to confirm it is the correct size for its intended use.
3. I acknowledge that the use of the supplied equipment always requires active adult supervision and responsible behavior in and around water
4. TO WAIVE ANY AND ALL CLAIMS that I have or may in the future have against The Town of Caledon or the Caledon Public Library, Employees, Agents and Representatives, (all of whom are hereinafter collectively referred to as “Releasees”);
5. To Release the Releasees from any and all liability for any loss, damage, injury or expense that I may incur whatsoever, INCLUDING NEGLIGENCE, BREACH OF CONTRACT, BREACH OF STATUTORY DUTY OF CARE AND/OR BREACH OF THE OCCUPIER’S LIABILITY ACT, R.S.O. 1990 S.O.2. ON THE PART OF THE RELEASEES;
6. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any liability for any property damage or personal injury to any third party, resulting from my borrowing the PFD; and
7. That this Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators and assigns, in the event of my death.

I have read and understood this Agreement prior to signing it, and I am aware that by signing this agreement I am waiving certain legal rights which I or my heirs, next of kin, executors, administrators and assigns may have against the Releasees.

PFD Identification Number(s)	
PFD Size(s)	
Date Borrowed (MM DD YYYY)	
Printed Full Name of Borrower	
Signature of Borrower	
<i>If the Borrower is less than the age of 18, a Parent or Guardian must sign prior to signing out a PFD</i>	
Printed Full Name of Parent/Guardian	
Signature of Parent/Guardian	
Signature of Library Staff	

Personal information on this form is collected under the authority of the Municipal Act