



CYPRESS COUNTY

816 - 2nd Avenue, Dunmore

Alberta T1B 0K3

Phone: (403) 526-2888

Email: publicworks@cypress.ab.ca

www.cypress.ab.ca

WAIVER AND RELEASE OF LIABILITY

PLEASE READ THIS CAREFULLY. BY SIGNING THIS LEGAL DOCUMENT, YOU GIVE UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE.

Access to and Unloading of Waste Cypress County Transfer Sites

Owner's Name: _____

Mailing Address: _____

Legal Address: _____

Phone Number: _____

Email Address: _____

I hereby release from all liability and agree not to sue **Cypress County and its Staff, Contractors and Agents** (hereinafter referred to as the "**County**") from any claim, demand or cause of action for personal injury, death, property damage or other loss or damage resulting from or in any way connected with **entering into the Cypress County Transfer Sites and unloading waste**, regardless of whether such personal injury, death, property damage or other loss or damage was caused or contributed to by the negligence of the **County** or any other person.

I acknowledge there are risks involved in **entering into the Cypress County Transfer Sites and unloading waste**. These include but are not limited to personal injury, death, property damage or other loss. I understand that the choice to **enter into the Cypress County Transfer Sites for the purpose of unloading waste** brings with it the assumption of those risks and I accept responsibility for my participation, including the possibility of personal injury, death, property damage or other loss.

I agree that I am **entering into the Cypress County Transfer Sites and unloading waste** voluntarily, and that all risks have been made clear to me. Additionally, I do not have any conditions that will increase my likelihood of experiencing injuries while engaging in this activity. I agree to obey all posted safety precautions and as explained to me orally and I will ask for clarification when needed.

I confirm that I am of the full age of 18 years, that I have had sufficient time to read and understand what I am agreeing to before signing, that I have had the opportunity to seek independent legal advice, and I understand that this Waiver and Release will be binding upon my heirs, next of kin, executors, administrators, and successors. I agree that this Waiver and Release will be governed by and interpreted in accordance with the laws of the Province of Alberta and I irrevocably agree that the court of the Province of Alberta have exclusive jurisdiction regarding this Waiver and Release.

I, _____, fully understand and agree to the above terms.
(print name)

(Signature)

(Date)

(Witness)

(Date)

This personal information is collected under the authority of section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act and will be managed in accordance with the privacy provisions under the FOIP Act. If you have any questions about the collection, contact the FOIP Coordinator, 816 - 2nd Avenue, Dunmore, Alberta T1B 0K3 (403) 526-2888.