

**Frontier Trails Camp – Busing & Transportation  
Release, Waiver and Indemnity**

I, \_\_\_\_\_ request permission for \_\_\_\_\_ (camper) to be driven to **Frontier Trails Camp**, by a specified driver, who will pick up at specified pick up zone, and deliver to camp or return from camp to specified drop of zone.

I fully understand that Highways are very dangerous. I wish to participate in this transportation knowing that it is very dangerous.

I accept and assume all the risks of injury, death or loss resulting from any cause whatsoever including but not limited to, collision with natural or man made objects, failure of equipment or otherwise, or negligence, breach of contract, or reach of statutory duty of care on the part of **Frontier Trails Camp** and their employees and agents (the operators) or any one of, or more of them. The risks include those foreseen and unforeseen, known or unknown.

Our Drivers are over 30 years of age, have no criminal record and have a clean driving record.

In consideration of the acceptance of my request and the granting of permission to participate in this transportation, I, for myself, irrevocably release waive, forever discharge and agree not to make or bring any claims, manner of actions, causes of action, demands, costs, expenses, liabilities, duties, of any kind, whether in law or equity against **Frontier Trails Camp**, the driver, vehicle owner, owners, employees, board members, guests or any landowners, landholders or other persons making property available for **Frontier Trails Camp**, in respect of death, injury, loss or damage to my person named above, or property howsoever caused, arising or to arise out of my participation in this dangerous horseback riding or related activity, and not withstanding that any claim may have been contributed to or occasioned by the negligence of any of the aforesaid.

I further undertake to hold and save harmless and agree to indemnify all of the foregoing from and against any and all liability incurred by any or all of them arising as a result of or in any way connected to my participation in the said activities at **Frontier Trails Camp**.

**I ACKNOWLEDGE HAVING READ, UNDERSTOOD AND AGREE TO THE  
ABOVE RELEASE, WAIVER AND INDEMNITY.**

**Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**(of parent or guardian if person named above is under 18 years of age)**

**Name of Student:** \_\_\_\_\_

**(under 18 years of age)**

**Phone Number:** \_\_\_\_\_

**Frontier Trails Camp**

**10545 Hwy 60, Eganville, Ont. K0J 1T0 613-625-2416 613-762-9087**