

**BHQG**

**REGISTRATION October 19, 2017.**

**MYSTERY SHOP HOP**

Information to be used in case of emergency:

Name \_\_\_\_\_

Telephone # \_\_\_\_\_

Cell # \_\_\_\_\_

Email address \_\_\_\_\_

Contact Person in Emergency - Name and Phone # \_\_\_\_\_

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Waiver of Liability

This agreement releases Brant Heritage Quilters Guild (BHQG) from all liability relating to injuries that may occur during the bus trip listed above. By signing and submitting this form I agree to hold BHQG free from any liability, including financial responsibility for injuries incurred, regardless of whether injuries are caused by negligence.

I also acknowledge the risks involved in the BHQG bus trip. I am participating voluntarily and all risks are clear to me. Additionally, I don't have any conditions that will increase my likelihood of experiencing injuries while engaging in this activity.

By signing below, I forfeit all right to bring suit against BHQG for any reason. In return, I will participate in the BHQG bus outing. I will also make every effort to obey safety precautions and I will ask for clarification when needed.

I, \_\_\_\_\_, fully understand and agree to the above terms.

Participant Signature \_\_\_\_\_

Date \_\_\_\_\_