



Volunteer Driver Waiver & Release of Liability Form

Activity: _____ **Date(s) of Activity:** _____

Volunteer driver information (please print):

Name: _____

Address: _____

Telephone: _____ Driver License No.: _____

(Indicate province or country)

Auto insurance company: _____

If you are not the vehicle owner:

Owner's Name and Address: _____

Vehicle License Plate Number: _____

I, _____ (print name), waive, release and discharge Wilfrid Laurier University Students' Union, and its employees, from any claims, demands, costs, causes of action, or damage as a result of property loss or damage, or personal injuries sustained to myself and to passengers of a vehicle that I am driving during participation in or traveling to and from locations of the activity named above. Furthermore, I intend this waiver and release to be legally binding.

I, the undersigned, hereby state that I am an adult over the age of eighteen (18) years, that I am mentally competent to make this release, and that I am driving a vehicle with the owner's permission for the above activity under my own volition. I further state that I understand and am abiding by the regulations outlined by the Ministry of Transportation in accordance with the class of licence I currently hold.

Signature of Volunteer Driver

Date

Signature of Witness (witness must be at least 18 years old)

Date

Printed Name of Witness