

# NOTICE TO ALL USERS OF THESE PREMISES AND FACILITIES

## EXCLUSION OF LIABILITY ASSUMPTION OF RISK • JURISDICTION

### PLEASE READ CAREFULLY!

**THESE CONDITIONS WILL AFFECT YOUR LEGAL RIGHTS INCLUDING THE RIGHT TO SUE THE OPERATOR FOR NEGLIGENCE, BREACH OF CONTRACT OR BREACH OF THE OCCUPIERS' LIABILITY ACT OR TO CLAIM COMPENSATION FOLLOWING AN ACCIDENT**

Your use of these premises and facilities and participation in activities on the premises involve various risks, dangers and hazards. Please visit the Safety & Risk Awareness website at: [www.skisafety.ca](http://www.skisafety.ca) or scan the QR code below for a description of these risks, dangers and hazards. A description of these risks, dangers and hazards is also available at guest services.

As a condition of your use of the premises and facilities and your participation in activities on the premises, you assume all risk of personal injury, death or property loss resulting from any cause whatsoever including NEGLIGENCE, BREACH OF CONTRACT OR BREACH OF ANY DUTY OF CARE OWED UNDER OCCUPIERS' LIABILITY ACT ON THE PART OF THE OPERATOR OF THE PREMISES AND FACILITIES and its employees and representatives (hereinafter collectively referred to as "the Operator").

- You agree that the Operator shall not be liable for any personal injury, death or property loss and release the Operator from all liability and waive all claims with respect thereto.
- Negligence includes failure on the part of the Operator to take reasonable steps to safeguard or protect you from or warn you of the risks, dangers and hazards referred to above.
- Any litigation involving the Operator shall be brought solely within Alberta and shall be within the exclusive jurisdiction of the Alberta Court.
- These conditions and any rights, duties and obligations involving the Operator shall be governed by and interpreted solely in accordance with the laws of Alberta and no other jurisdiction.



**THE OPERATOR'S LIABILITY FOR NEGLIGENCE, BREACH OF CONTRACT OR BREACH OF THE OCCUPIERS' LIABILITY ACT IS EXCLUDED BY THESE CONDITIONS.**

1.	NAME	EMPLOYEE INITIALS/DEPT.	I have read the Notice printed above and I agree to be bound by these conditions.
	TICKET NO.	DATE	SIGNATURE OF TICKET HOLDER:

2.	NAME	EMPLOYEE INITIALS/DEPT.	I have read the Notice printed above and I agree to be bound by these conditions.
	TICKET NO.	DATE	SIGNATURE OF TICKET HOLDER:

3.	NAME	EMPLOYEE INITIALS/DEPT.	I have read the Notice printed above and I agree to be bound by these conditions.
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