

PA PARACANOE WAIVER FOR PFD USE

ATHLETE NAME:

ATHLETE COMPETITION NUMBER: _____

CLUB: _____

I witness that I have excellent swimming ability, and not wearing a PFD at this competition presents no risk of personal injury or harm to myself. I will not hold PA, or the PA Sprint Canoe organizing committee or any of their representatives responsible for any harm or injury, which may occur to myself as a result of not wearing a PFD.

ATHLETE SIGNATURE:

DATE: _____

I witness that this athlete has excellent swimming ability and not wearing a PFD at this competition presents no risk of personal injury or harm to him/her. We will not hold PA or the PA Sprint Canoe organizing committee or any of their representatives responsible for any harm or injury, which may occur to this athlete as a result of not wearing a PFD.

WITNESS:	
WITNESS SIGNATURE:	

DATE: _____