Water Polo Canada — Assumption of Risk and Medical Consent

Short-Term Program — Quebec — 2026-2027 Season

PARTICIPANT INFORMATION

To be completed by the Registrant or, where the Registrant is a Minor, by the Parent/Guardian on the Minor's behalf. All fields below refer to the Participant (Registrant). For phone number and email address, provide the Participant's own if the Minor has one; otherwise, provide the Parent/Guardian's.

Participant's first name: _____

Participant's last name: _____

Participant's date of birth (YYYY-MM-DD): _____

Participant's phone number(if applicable): _____

Participant's email address(if applicable): _____

PART A — ASSUMPTION OF RISKS

PLEASE READ CAREFULLY. Water polo and the activities organized by Water Polo Canada ("WPC"), the Provincial and Territorial Sport Organizations ("PTSOs"), and registered water polo clubs (collectively the "Organization") involve risks of injury that cannot be eliminated. By accepting this Agreement, the Registrant — or, where the Registrant is a Minor, the Parent/Guardian on the Minor's behalf — confirms that they understand and accept those risks.

1. Nature of the Activities

The Activities include training, practices, scrimmages, exhibition and competitive games at the club and provincial level, dryland conditioning, travel to and from venues within Canada, and related program activities, conducted in and around water. They take place in pools, training facilities, gymnasiums, and other locations selected by the Organization.

2. Risks That Are Inherent to the Activities

The Registrant or, where applicable, the Parent/Guardian acknowledges that the Activities carry risks of physical injury and other harm, including, without limitation:

a) Drowning, near-drowning, water aspiration, and hypothermia;

b) Sprains, strains, fractures, dislocations, concussion and other head and spinal injuries, dental and facial injuries, and cuts and bruises caused by contact with the ball, equipment, the pool structure, or other participants;

c) Cardiovascular events, heat illness, dehydration, and over-exertion;

d) Exposure to communicable diseases through close contact, shared equipment, or shared facilities;

e) Injury caused by the acts or omissions of other Registrants, opponents, officials, or spectators, including conduct that is negligent, reckless, or contrary to the rules of the sport;

f) Equipment failure or facility conditions;

g) Travel to and from Activities, including transport organized by the Organization and self-arranged travel;

3. Assumption of Risks and release regarding personal property

The Registrant or, where applicable, the Parent/Guardian, having read the foregoing, freely and knowingly assumes the risks inherent to the Activities, including those described in section 2 and any other risks that are reasonably foreseeable for an activity of this nature. This assumption of risks is given as a free, informed, and explicit acknowledgment. It is not, and is not intended to be, a waiver of the Organization's civil liability for bodily or moral injury caused by an intentional or gross fault, which liability cannot be excluded in advance under article 1474 of the Civil Code of Québec.

The Parent/Guardian releases the Organization and its directors, officers, employees, coaches, officials, volunteers, contractors, and agents from any liability for loss, theft, or damage to personal property brought to or used in connection with the Activities, including clothing, equipment, electronics, jewellery, vehicles, and other personal effects, whether stored in lockers or change rooms, left on the pool deck or in spectator areas, carried during transport organised by the Organization, or otherwise present in connection with the Activities.

4. Medical disclosure and emergency care

The Registrant or, where applicable, the Parent/Guardian agrees to disclose any medical condition, allergy, or medication that may affect safe participation, and authorizes the Organization's coaches, designated staff, and qualified emergency responders to provide first aid, arrange transport to a medical facility (including by ambulance), and, where the Registrant is a Minor and the Parent/Guardian cannot be reached in time, consent on the Minor's behalf to medical, surgical, dental, anaesthetic, hospital, or diagnostic treatment that cannot reasonably be delayed without risk to the Minor's health. The Registrant or Parent/Guardian remains responsible for the cost of care, except to the extent covered by provincial health insurance or by insurance provided by the Organization or by a sport federation.

SIGNATURE

By signing below, I confirm that I have read and understood this Agreement, and that I am either (i) the Registrant and have reached the age of majority in my province or territory of residence, accepting this Agreement on my own behalf; or (ii) the Parent/Guardian of the Registrant, the Registrant is a Minor in the Minor's province or territory of residence, and I am accepting this Agreement on the Minor's behalf to the extent permitted by the law of that jurisdiction.

Signature of Adult Registrant: _____ Date: _____

Printed name: _____

OR (where the Registrant is a Minor)

Signature of Parent/Guardian: _____ Date: _____

Printed name of Parent/Guardian: _____

Name of Minor Registrant: _____