

*Helping PLHIV realize their individual leadership potential*

## RELEASE OF LIABILITY

**NOTE: This release of liability is a legally binding document.**

**It is important that you read it carefully and understand it.**

**If you are unable to read this form, or have questions, please speak with Stacy LeBlanc, Director of Program Development or Jaydee Cossar, PLDI Manager.**

I, \_\_\_\_\_ (Print; name of participant), attending and/or participating in the **Positive Leadership Development Institute – Mental Health First Aid (MHFA) Basic Training, at the Vancouver Airport Marriott in Richmond BC** from March 15 – 17<sup>th</sup> 2019, do hereby for myself, my heirs, executors, administrators, successors, assigns and representatives, waive any and all claims which I may have against the **Pacific AIDS Network Society, the Ontario AIDS Network, Coalition des Organismes Communautaires Québécois de Lutte Contre le Sida, the Mental Health Commission of Canada** the organizers and sponsors of the program, and their directors, officers, employees, contractors, agents and representatives, **and any volunteers** in any way connected with the program, including any instructor(s), facilitator(s) or counselor(s) (all of whom are hereinafter collectively referred to as “the Releasees”) and do hereby release the Releasees from any and all liability for any loss, damage or expense that I may sustain for any personal injury or property damage resulting from my attendance at the Mental Health First Aid (MHFA) Basic Training, and/or my participation in the Positive Leadership Development Institute (PLDI). *If for any reason I decide not take part in the Mental Health First Aid (MHFA) Basic Training, I agree to remain at Vancouver Airport Marriott. In this instance I am aware that I may still partake of meals provided by the Vancouver Airport Marriott in Richmond the same as those still participating in PAN’s Positive Leadership Development Institute, as well as remain in my assigned room accommodation.*

**I confirm that I have read and understood this Release of Liability prior to signing it, and that by signing this Release of Liability I am waiving certain legal rights which I, or my heirs, executors, administrators, successors, assigns and representatives may otherwise have had against the Releasees. I further confirm that I am over the age of nineteen (19) years.**

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

\_\_\_\_\_  
**Date:**

\_\_\_\_\_  
**Witness (PLDI Manager)**

\_\_\_\_\_  
**Date:**