COUREUR de BOIS OUTDOOR CLUB

| | VOYAGEUR TRAIL ASSOCIATION | LEADER'S CHECKLIST: Are the participants: |
|------------------|--|--|
| | Date: | Inexperienced Dressed properly Lunch & water Children |
| | Event Description: | Sign agreement Offer brochure on VTA |
| | hikesnowshoework partyother: | Introductions done Expectations: distance, breads, return time |
| Outing began at: | Leader: | Appoint sweep Explain sweep's role |
| Ended at: | Sweep: | Any questions? Count how many _ Car pool |
| | (For purposes of the free end-of-the-year draws, only ONE name for Leader & Sweep please | On trail, stop for breaks & count Report trail conditions afterwards |
| | A COMPANION OF WICE A CONTRACT | |

ASSUMPTION OF RISK AGREEMENT

I hereby acknowledge the nature of the event and related activities I am undertaking with the Coureurs des Bois Outdoors Club of the Voyageur Trail Association and the risks, which may be determined by, but are not limited to, my physical condition, clothing and personal equipment, tools used, terrain, weather, distance travelled during the event, other participants and vehicular traffic, and voluntarily assume the risk of injury, death and property damage to myself and others. (Hike Ontario is asking us to voluntarily keep track of the age

of our participants for statistical purposes when applying for grants only. Children under 18 may not sign Age Name (please print) Signature Phone No. **Emerg. Contact** 19-40 41-60 61-70 < 18 70+ 1 2 3 4 5 6 7 8 9 10 12 13 **L7** 18 20 21 9

| VOYAGEUR TRAIL ASSOCIATION ASSUMPTION OF RISK AGREEMENT (cont'd.) - Page 2 | | |
|---|--|--|
| Outing Leader: Please record the name(s) below of anyone who refused to sign in, and have someone witness your signature. | | |
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| Outing Leader: | | |
| Witness: | | |
| Outing Leader: Please fill in and submit report below. REPORT OF TRAIL CONDITIONS: | | |
| Where did you start and finish? | | |
| | | |
| How was the condition of the trail? | | |
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| Do we need to send in further work parties? | | |
| 20 We faced to Seria In Infline. Work purites: | | |
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| Any other comments (i.e. blazes, signage, re-routes needed, etc.)? | | |
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| Report of "Incidents" that happened or came close to happening (to VTA Coordinating Council for discussion): | | |
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Please send this to: VTA, PO Box 20040, 150 Churchill Blvd., Sault Ste. Marie, ON P6A 6W3. Thank you. (REMEMBER: Draws will be made at the end of each year for free memberships for those who lead outings, serve as sweep, and all those who participate in work parties, but we can only enter their names if this sheet is handed in.)