

## SANCTIONED AND REQUIRED BY: ATHLETICS ONTARIO

RELEASE, WAIVER AND INDEMNITY

IN CONSIDERATION of the acceptance of my application and the permission to participate as an entrant or competitor in the:

800m/Long Jump Night on Thursday, June 28, 2018

I, for myself, my heirs, executors, administrators, successors and assigns HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE:

Athletics Ontario

Athletics Ontario Officials Name of parties to be protected

(Meet Director: Chris Davis, Phoenix Athletics Association, Birchmount Stadium, City of Toronto)

And all other associations, sanctioning bodies and sponsoring companies, and all their respective agents, officials, servants, contractors, representatives, successors and assigns OF AND FROM ALL claims, demands, damages, costs, expenses, actions and causes of action, whether in law or equity, in respect of death, injury, loss or damage to my person or property HOWSOEVER CAUSED, arising or to arise by reason of my participation in the said event, whether as spectator, participant, competitor or otherwise; whether prior to, during or subsequent to the event AND NOTWITHSTANDING that same may have been contributed to or occasioned by the negligence of any of the aforesaid.

I FURTHER HEREBY UNDERTAKE to HOLD AND SAVE HARMLESS and AGREE TO INDEMNIFY all of the aforesaid from and against any and all liability incurred by any or all of them arising as a result of, or in any way connected with my participation in the said event. BY SUBMITTING this ENTRY, I ACKNOWLEDGE HAVING READ, UNDERSTOOD AND AGREED to the above WAIVER, RELEASE AND INDEMNITY. I WARRANT that I am physically fit to participate in this event and I AGREE to withdraw from the race if so requested by the designated medical officer.

Date	 Print Name	
If under 18 yea	rs, a Parent or Guardian or Power of A	
Date	Print Name	Signature of Parent or Guardian Or Power of Attorney
Canadian Anti-	Doping Program (CADP)	
in Canada. Adm of athletes or a I am aware that required as par	ninistered by the Canadian Centre for l thlete support personnel, who are reg t the CADP applies to me and that I an t of my registration of this event. By p	ci-Doping Program (CADP), which is the set of rules that govern doping control Ethics in Sport (CCES), the CADP applies to all individuals, whether in the role gistered for and participate in this event. By signing below, I acknowledge that in subject to the CADP. Completion of an online education course may be articipating in this event, I consent to the application of the CADP to me. For the CCES website <a href="www.cces.ca/athletezone">www.cces.ca/athletezone</a> .
Date	Print Name	Signature
If under 18 yea	rs, a Parent or Guardian or Power of A	ttorney is to sign below.
Date	Print Name	Signature of Parent or Guardian Or Power of Attorney