

## Track North – Sudbury Twilight #1 – Wed. June 3<sup>rd</sup>, 2019

## **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:

Sudbury Twilight Track and Field Meet on June 3rd, 2019

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

Athletics Ontario
Athletics Ontario Officials
Track North Athletic Club
North Bay Legion Track and Field Club
Laurentian University
City of Greater Sudbury
Darren Jermyn, Richard Moss

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	Signature
If under 18 years, a	a Parent or Guardian or Power of Attorney is t	o sign below.
Date	 Print Name	Signature of Parent or Guardian Or Power of Attorney
	oing Program (CADP)	Signature of Furences Guardian of Fower of Attorney
Canadian Centre for and participate in to online education co	or Ethics in Sport (CCES), the CADP applies to a this event. By signing below, I acknowledge th	rogram (CADP), which is the set of rules that govern doping control in Canada. Administered by the fill individuals, whether in the role of athletes or athlete support personnel, who are registered for at I am aware that the CADP applies to me and that I am subject to the CADP. Completion of an ion of this event. By participating in this event, I consent to the application of the CADP to me. For ebsite <a href="www.cces.ca/athletezone">www.cces.ca/athletezone</a> .
Date	Print Name	Signature
If under 18 years, a	a Parent or Guardian or Power of Attorney is t	o sign below.
Date	Print Name	Signature of Parent or Guardian Or Power of Attorney