



**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: Hamilton Season Opener Twilight on Sunday, May 17th, 2026.

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

DISCHARGE: Athletics Ontario;  
Athletics Ontario Officials;  
Harbour Track Club – Hamilton and its Directors and Officers;  
McMaster University;  
City of Hamilton;  
The designated “Meet Director” as outlined in the Technical Package and registration page;

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 Parent or Guardian or Power of Attorney is to sign below.

\_\_\_\_\_  
Date                      Print Name                      Signature of Parent or Guardian or Power of Attorney

**CANADIAN ANTI-DOPING PROGRAM (CADP)**

Athletics Canada has adopted the 2009 Canadian Anti-Doping Program (CADP), which is the set of rules that govern doping control in Canada. Administered by the Canadian Centre for Ethics in Sport (CCES), the CADP applies to all individuals, whether in the role of athletes or athlete support personnel, who are registered for and participate in this event. By signing below, I acknowledge that I am aware that the CADP applies to me and that I am subject to the CADP. Completion of an online education course may be required as part of my registration of this event. By participating in this event, I consent to the application of the CADP to me. For further information, please visit the Athlete Zone on the CCES website

[www.cces.ca/athletezone](http://www.cces.ca/athletezone).

\_\_\_\_\_  
Date                      Print Name    Signature

If under 18 years, a Parent or Guardian or Power of Attorney is to sign below.

\_\_\_\_\_  
Date                      Print Name                      Signature of Parent or Guardian Or Power of Attorney