



**RUNNING PROGRAM LIABILITY WAIVER/INFORMED CONSENT FORM**

"My child(ren), \_\_\_\_\_(child(ren)'s name), has enrolled in a specialized running program through Beaches Blue Devils. I recognize that the program may involve strenuous physical activity. I hereby affirm that my child(ren) is in good physical condition and does not suffer from any known disability or condition which would prevent or limit his/ her participation in the program." "In consideration of my child(ren)'s participation in the running program I, \_\_\_\_\_(parent or guardian's name), hereby release Beaches Blue Devils and its agents from any claims, demands, and causes of action as a result of my child's voluntary participation."

"I fully understand that my child may injure his/ herself as a result of his/ her participation in the program and I \_\_\_\_\_, hereby release Beaches Blue Devils and its agents from any liability now or in the future for conditions that my child may obtain. These conditions may include, but are not limited to; heart attacks, muscle strains, muscle pulls, muscle tears, broken bones, shin splints, heat prostration, injuries to the knee, the back, to the foot or soreness that my child may incur including death."

I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENTS.

Print Name of Minor Child(ren) \_\_\_\_\_  
Parents Signature \_\_\_\_\_  
Parents Name \_\_\_\_\_  
Date: \_\_\_\_\_

**PHOTO RELEASE WAIVER**

I hereby grant permission to the Beaches Blue Devils, and its officers, (hereinafter "Blue Devils") to photograph or video my child(ren)'s image. I hereby grant permission to the Blue Devils to edit, crop, or retouch such photographs or videos, and waive any right to inspect the final photographs. I hereby consent to and permit photographs of my child(ren) to be used by the Blue Devils worldwide for any purpose, including educational and advertisement purposes, and in any medium, including print and electronic. I understand that the Blue Devils may use such photographs with or without associating names thereto. I further waive any claim for compensation of any kind for the Blue Devils' use or publication of photographs of my child(ren) (if applicable).

I acknowledge and represent that I am over the age of 18, have read this entire document, that I understand its terms and provisions, and that I have signed it knowingly and voluntarily on behalf of my child(ren).

I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENTS.

Print Name of Minor Child(ren) \_\_\_\_\_  
Parents Signature \_\_\_\_\_  
Parents Name \_\_\_\_\_  
Date: \_\_\_\_\_

# Minor Track Association of Ontario and Athletics Ontario Power of Attorney

This power of attorney is given on the \_\_\_\_\_ day of \_\_\_\_\_, 2017 by \_\_\_\_\_ (name of "Donor") of the **CITY** (insert the word Town, City, etc.) Of **TORONTO** (insert name of Community) in **MUNICIPALITY** (insert the word "Municipality", "Regional Municipality", etc.) Of **CITY OF TORONTO** (insert the name of the Municipality, Regional Municipality, etc.).

## Appointment of Attorney

I appoint **KYLE SMITH** (insert name of "Attorney") of the **CITY** (insert the word Town, City, etc.) Of **TORONTO** (insert name of Community) in **MUNICIPALITY** (insert the word "Municipality", "Regional Municipality", etc.) Of **CITY OF TORONTO** (insert the name of the Municipality, Regional Municipality, etc.) to be an Attorney in accordance with the Power of Attorney act and to do in my behalf anything that I can lawfully do by as Attorney.

## This Power of Attorney is subject to the following conditions and restrictions.

This Power of Attorney shall only apply to enable said Attorney to execute said entry forms, waivers and other documents as shall be required to permit \_\_\_\_\_ (insert name of athlete), Age \_\_\_\_\_ (insert age of athlete) of whom I am the \_\_\_\_\_ (insert name of either Mother, Father or Legal Guardian) to participate in any event sponsored or sanctioned by the Minor Track Association of Ontario and/or Athletics Ontario during the year 2017 (insert year) ending December 31<sup>st</sup>, inclusive. I hereby acknowledge that by signing said entry forms, waivers and other documents that any Attorney(s) may WAIVE ANY AND ALL CLAIMS that said \_\_\_\_\_ (insert name of athlete) or his or her heirs, executors, contractors, representatives, successors and assigns with regards ANY demands, damages, costs, expenses, actions and causes of actions, where in law or equity, in respect of death, injury, loss or damage to the said \_\_\_\_\_ (insert name of athlete) OR to his property, HOWEVER CAUSED arising or to arise by reason of said \_\_\_\_\_ (insert name of athlete) participation in any Minor Track Association and/or Athletics Ontario sponsored or sanctioned event in the said 2017 (insert year) calendar year, whether prior to, during or subsequent to any such event and NOTWITHSTANDING that some may have contributed to or occasioned by the negligence of any of the aforesaid.

**Note: Signature of Parent or Legal Guardian verifies that you have read and agree to the above.**

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Signature of Parent/Legal Guardian