ATHLETICS MANITOBA

TRACK AND FIELD / ROAD RUNNING / CROSS COUNTRY

145 Pacific Ave. Winnipeg, MB. R3B 2Z6 • Tel: 204-925-5745 • Fax: 204-925-5792 programs@athleticsmanitoba.com • execdirector@athleticsmanitoba.com

Assumption of Risk

INFORMED CONSENT AND ASSUMPTION OF RISK AGREEMENT (FOR PARTICIPANTS 17 YEARS OLD AND YOUNGER)

WARNING! By signing this document you will waive certain legal rights, including the right to sue in circumstances outlined in this Agreement. Please read carefully.

Participant's Name:	Date:
 This is a binding legal agreement; therefore classigning. As a Participant participating in the spontage competitions and practices (collectively the "Ac Participant and the Parent/Guardian of the Part acknowledge and agree to the following terms: 	ort of Athletics, including training, tivities"), the undersigned, being the icipant (collectively the "Parties")

Disclaimer

2. Athletics Manitoba and its coaches, instructors, agents, and representatives (collectively the "Organization") are not responsible for any injury, personal injury, damage, property damage, expense, loss of income or loss of any kind suffered by a Participant during, or as a result of, the Activities, caused by the risks, dangers and hazards associated with the Activities.

☐ We (I) have read and agree to be bound by paragraphs 1 and 2

Description of Risks

- 3. The Participant is participating voluntarily in the Activities. In consideration of that participation, the Parties hereby acknowledge that they are aware of the risks, dangers and hazards and may be exposed to such risks, dangers and hazards. The risks, dangers and hazards include, but are not limited to, injuries from:
 - a) The hazards particular to the Activity(ies) in which I am participating;
 - a) Executing strenuous and demanding physical techniques;
 - b) Vigorous physical exertion, strenuous cardiovascular workouts and rapid movements;
 - c) Exerting and stretching various muscle groups;
 - d) Failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment;
 - e) Contact, colliding, falling or being struck by other participants or equipment; and
 - f) Spinal cord injuries which may render the Participant permanently paralyzed.
- 4. Furthermore, the Parties are aware:
 - a) That injuries sustained can be severe;
 - b) That the Participant may experience anxiety while challenging himself or herself during the activities, events and programs;
 - c) That the Participant may come into close contact with other participants;
 - d) That the Participant's risk of injury is reduced if the Participant follows all rules established for participation; and
 - e) That the Participant's risk of injury increases as the Participant becomes fatigued.

Date

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Release of Liability

- 5. In consideration of the Organization allowing the Participant to participate, the Parties
 - a) That the Participant's physical condition has been verified by a medical doctor to participate:
 - b) To freely accept and fully assume all such risks, dangers and hazards and possibility of personal injury, death, property damage, expense and related loss, including loss of income, resulting from the Activities;
 - c) To forever release the Organization from any and all liability for any and all claims, demands, actions and costs that might arise out of the Participant's participation in the Activities, or from any breach of contract.

☐ We (I) have read and agree to be bound by paragraphs 3 -5 **Acknowledgement** 6. The Parties acknowledge that they have read this agreement and understand it, that they have executed this agreement voluntarily, and that this Agreement is to be binding upon themselves, their heirs, executors, administrators and representatives. Printed Name of Participant Date of Birth Signature of Participant Printed Name of Parent or Guardian Signature of Parent or Guardian