

## PEDAL FOR THE PAST

## **Participant Registration Form and Waiver**

## Date of event: Saturday, September 30, 2017

Sainte-Marie among the Hurons - 16164 Highway 12 East, Midland, ON L4R 4K8

- Registration for all participants is due by July 31, 2017.
- Participants are encouraged to get pledges. The top fundraisers will receive a great prize pack.
- Registration forms can be sent by email to Jennifer Bennett at support@oppmuseumfriends.ca or by fax to (705) 329-6618 or completed and submitted on-line at <a href="https://www.oppmuseumfriends.ca">www.oppmuseumfriends.ca</a>

Participant's La	st Name:			First Name:			
Street:			City:		Ро	Postal Code:	
elephone:		E-mail:					
Emergency contact phone number:		Emergency contact name:					
n registering	for:						
Ride		☐ 25 km	□ 50	0 km	□ 100 l	km	
Walk o	r Run	☐ Heritage Walk		km	☐ 10 km		
Includes	1 event	isex): 🛚 XS 🖺 S	arbecue, sn	acks, prizes, games a	XL [] 4XI		
<del>                                   </del>							
				dal for the Past Bik		\$150.00	
Jersey s	size (uni for Jerse	sex): [XS [S [	] M [] <b>L</b> d by July 3	☐ XL ☐ 2XL ☐ 3X	(L 🛮 4XL	\$150.00	
*Orders purchase	size (uni for Jerse ed directl	sex): [] XS [] S [] ys MUST be receive	M [L d by July 3 Duty ShOP	☐ XL ☐ 2XL ☐ 3X 1, 2017. After this date P for \$100.00.	(L 🛮 4XL	\$150.00	

Deposits and pledges can be paid by Visa/MasterCard on-line at <a href="www.oppmuseumfriends.ca">www.oppmuseumfriends.ca</a> (be sure to include the name of the participant being sponsored in the comments section); make cheques payable to **Friends of The OPP Museum.** 



## Waiver and Release of Liability (Please read and sign below)

I wish to participate in **Friends of** *The OPP Museum* Pedal, *Run and Walk for* the Past benefiting *The OPP Museum* scheduled to take place on Saturday, September 30, 2017, and I agree to abide by all rules, regulations, and instructions of the event, as well as all applicable municipal and provincial laws and regulations.

I understand that participating in such an event, using public streets and facilities, and the use of and participation in services made available to participants during the event is a potentially hazardous activity and can result in serious personal injury or death.

I am aware of and expressly assume all risks associated with participating in this event, including, without limitation, falls, contact with other participants, objects, bicycles and vehicles, the effects of weather, traffic, and the conditions of the streets and route used by the event and I assert that my participation in this event is voluntary.

In consideration for being permitted to participate in this event, I, for myself and for anyone entitled to act on my behalf, hereby waive and release from any and all claims for injuries and damages I may have arising out of the event or my participation in the event (including without limitation any preand post-event activities), against the Friends of The OPP Museum, The OPP Museum, the Ontario Provincial Police, the Province of Ontario, Canada, any beneficiaries, sponsors, officials, participating clubs, communities, organizations, friends of the event, consultants, participants, third-party vendors, government or public entities (including, without limitation, the Department of Transportation), and their respective affiliates, successors, officers, directors, employees, volunteers, agents, and representatives, including, without limitation, and including first-aid team members.

I intend by this Waiver and release, in advance, to waive my rights, to covenant not to sue to release for future claims, and to discharge all of the persons and entities mentioned above, from any and all loss or damage, including, but not limited to claims for damages for death, personal injury or property damage that I may have, or which may hereafter accrue to me, as a result of my participation in this event, even though that liability may arise from negligence, carelessness, or recklessness (whether simple or gross) on the part of the persons or entities being released, from dangerous or defective property or equipment owned, maintained, or controlled by them or because of their possible liability without fault. I understand and agree that this Waiver and release is binding on my heirs, assigns, and legal representatives.

I attest that I am physically capable of, and have sufficiently trained for, completing this event. If I am aware of or under treatment for any physical infirmity, disorder, ailment, or illness, my medical care provider has been apprised of, and has approved of, my participation in this event.

I acknowledge that I and I alone am solely responsible for my personal health and safety, and the personal property I bring with me. I consent to receive medical treatment which may be advisable in the event of illness or injuries suffered by me during this event, and I agree to pay for the costs of any such medical treatment.

I agree that my participation in the event is subject to the sole discretion of the organizers of the event, and that my participation may be limited or terminated, with or without cause.

I understand that all monies processed by Friends of *The OPP Museum* Pedal for the Past are non-refundable and non-transferable, even if I do not participate in the event.

This waiver and release shall be interpreted and the rights of the parties determined under the laws of the Province of Ontario. The Ontario courts shall have exclusive jurisdiction for any dispute arising under, or pertaining to, this Waiver and release.

I have carefully read this Waiver and Release and fully understand its contents. I am aware that this is a release of liability and a binding contract between me and the persons and entities mentioned above and I sign it of my own free will. I understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing this Waiver and Release freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Participant's name (please print)	Participant's signature	Parent/Guardian signature (if under 18)						
PRIVACY WAIVER (RESPONSE REQUIRED) Friends of <i>The OPP Museum</i> may publish, post online, or otherwise disclose my name as a								
supporter in its publications and/or website:	□ I Agree	☐ I Do Not Agree						
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Date:								
Date.								