

WADENA'S "CHARITY OF YOUR CHOICE" RUN

.....promoting healthy living and physical fitness while helping others in need

Welcome Participants!

Date: Saturday, October 8th, 2016 **Start time:** 10:00 am (Warm-up will begin at 9:45 am)

Location: Wadena, Saskatchewan. The event will begin and end at the Wadena Curling Club.

REGISTRATION FORM

LAST Name: _____ **FIRST Name:** _____

Address: _____ **Province:** _____

Postal Code: _____ **Phone Number:** _____

E-mail Address: _____

PLEASE NOTE: Participants 12 and under **MUST** be accompanied by an adult.

Registration Fees:

0-5 years-FREE

6-12 years-\$5.00

13-18 years-\$10.00

19 plus- \$25.00

New This Year: Relay Option

Grab some friends or family members and split up the race!

Charity Choices:

- | | | |
|---|--|--|
| <input type="checkbox"/> Canadian Cancer Society | <input type="checkbox"/> Alzheimer Society | <input type="checkbox"/> Parkinson Society |
| <input type="checkbox"/> Multiple Sclerosis Society | <input type="checkbox"/> Heart and Stroke Foundation | <input type="checkbox"/> Canadian Diabetes Association |
| <input type="checkbox"/> Autism Speaks Canada | <input type="checkbox"/> Children's Hospital Foundation of Saskatchewan | |
| <input type="checkbox"/> Wadena Food Bank Association | <input type="checkbox"/> STARS Foundation | |
| <input type="checkbox"/> Kids First (Wadena's Kids Sport) | <input type="checkbox"/> Juvenile Diabetes Research Foundation of Canada | |
| <input type="checkbox"/> Other: _____ | | |

Cheques preferred please.

Please make cheque payable to: **Wadena's Charity of Your Choice Run**

Pledge sheets are not required; however, we have attached one if desired.

Your entry includes a snack
following your walk/run and
door prize draws.

Race Packages should be picked up the day before, Friday, October 7th at the Wadena Curling Club between 6pm-7pm. If you unable to do so, race packages may be picked up on the morning of the race at the Wadena Curling Club from 8:30am-9:30am.

Please return completed form to the **Wadena Town Office, E and K Dollar Variety and Trophies, Wadena Drugs or Wadena Elementary School by Friday, September 30th, 2016.**

For more information contact Marcy Comfort (marcy.comfort@yahoo.ca)

WAIVER

DISCLAIMER

Wadena’s Charity of Your Choice Run and all Event committee persons, service providers, officials, volunteers, the Town of Wadena including RCMP and EMS, and all sponsors and suppliers to the Event (the “Releasees”) are not responsible for any death, injury, loss, or damage suffered by the Participant named below while participating in the 2016 Wadena’s Charity of Your Choice Run (the “Event”), and caused in any manner whatsoever, including, but not limited to, negligence by the Releasees.

ASSUMPTION OF RISK

I AM FULLY AWARE OF THE RISKS ASSOCIATED WITH PARTICIPATING IN THE EVENT AND I FREELY ACCEPT AND FULLY ASSUME ALL RISKS, AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, PROPERTY DAMAGE, OR LOSS. These risks include, among other things, injuries resulting from: vigorous physical exertion; falls due to uneven or irregular terrain or surfaces; and from colliding with or being struck by other participants, spectators, equipment or vehicles.

It is acknowledged that participating in the Event requires proper physical training, and that the Participant (and Parent/Guardian, if applicable) is solely responsible for ensuring that the Participant is physically capable of participating.

RELEASE OF LIABILITY In consideration for the Releasees agreeing to the Participant’s participation in the Event, I agree: To waive all claims that the Participant has or may in the future have against the Releasees, and to release the Releasees from all liability for loss, damage, expense or injury that the Participant may suffer as a result of participation in the Event, due to any cause whatsoever, including negligence of the Releasees; and To assume all risks and be solely responsible for any injury, loss or damage which the Participant might sustain while participating in the Event, even though such injury, loss, or damage may have been caused by the Releasees.

OTHER AGREEMENTS

I consent to the use of the Participant's name, results and awards, age category and photos of the Participant from the Event in any publicity associated with the Event and in any form of promotional material for the Event or future events. I also consent to the use of information contained in the registration form for the purpose of soliciting the Participant's participation in, or volunteering at, future events.

I ACKNOWLEDGE THAT I HAVE READ THIS WAIVER AGREEMENT AND FULLY UNDERSTAND ITS TERMS. I ACKNOWLEDGE THAT I AM ENTERING INTO THIS AGREEMENT VOLUNTARILY, AND I INTEND FOR IT TO BE BINDING ON MYSELF, MY HEIRS, EXECUTORS, ADMINISTRATORS, AND REPRESENTATIVES.

Signature of Participant or Parent/Guardian: _____
(if Participant is under 18 years of age)

Date: _____

Wadena’s Charity of Your Choice Run
Sunday, June 9th, 2013

Name of Participant: _____

Charity of Choice: _____ (Participant chooses 1)

First Name	Last Name	Address	Town	Province	Postal Code	Pledge

[illegible]