

Kawartha World Record Snowshoe Event 2018

Acknowledgement of Risks

I understand and acknowledge that participation in the Activity is voluntary. I understand and acknowledge that the Activity may be hazardous, that participation is solely at my child's own risk, and that I assume full responsibility for any injuries (including death) or damages resulting from my child's participation in the Activity. I affirm that my child is in good health and at an appropriate level of physical fitness and physical capability to participate in the Activity. I affirm that I am at least 18 years of age, or that I am the parent and/or legal guardian of the child listed below and I hereby have consent to their participation and waive liability on their behalf.

By signing this document, the participant/guardian acknowledges having read this document and understands that the participant/guardian is waiving certain legal rights, including the right to sue.

Consent to use Image

I hereby consent and authorize Snowshoe Canada to take a photograph/image of the child listed below. I acknowledge and agree that Snowshoe Canada may publish, display or use the image for promotional purposes, and that this may include electronic or digital means. I acknowledge that Snowshoe Canada may not be able to control the distribution or use of the image by other than their representatives. I hereby waive and release them from and against any and all Liability whatsoever which may result from the taking, use, display, publication or distribution of the image.

Parent/Guardian Signature

Witness Signature

Name: _____

Name: _____

Date: _____

Date: _____

Name of child: _____

Name of adult meeting child after World Record Tour: _____

Please bring this with you to the Salvation Army Citadel building registration table

42 Bond Street, Fenelon Falls, Ontario

Registration opens at 9 AM, closes at 10:30 AM

Snowshoe Canada

Kids 1K World Record Tour

Registration Information

Child's name: _____

Address: _____
Street *Apartment/Unit #*

_____ _____ _____
City *Prov* *Postal Code*

Phone: _____ **Child's school:** _____

Parent/Guardian: _____

Supervising adult as above: _____ **Alternate supervising adult's name:** _____

Children must be accompanied by an adult to and from the ice event area. All participants need to return snowshoes to the registration area; where they will be served hot apple cider. A list of places to eat offering specials to Festival participants will be available at the registration area. Thank you!