

Edmonton Harriers is happy to extend the opportunity to your athlete to try out with the club for up to two weeks. However, for insurance purposes, we insist that all prospective members email or mail a completed and signed waiver form BEFORE they will be allowed to train with us. If we do not have this waiver form you will be required to leave the track surface. All our members have Athletics Alberta membership which provides insurance coverage. This is a requirement of the Edmonton Track Council, which actually books the facility. Sorry but there can be NO EXCEPTIONS to this.

EDMONTON HARRIERS

AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in the **Edmonton Harriers** athletic sports program, related events and activities, I _____ (print name) the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately, and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS **Edmonton Harriers**, their officers, officials, agents and/or employees, coaches, volunteers, other participants, sponsoring agencies, sponsors, advertisers and, if applicable owners and lessors of premises used to conduct the event (“Releasees”), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNIFICANT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X _____

PARTICIPANT’S SIGNATURE

X _____ Date Signed: _____

WITNESS

FOR PARTICIPANTS OF MINORITY AGE

(UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for the participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident of my minor child’s involvement or participation in these programs as provided above.

X _____

PARENT/GUARDIAN’S SIGNATURE PARENT/GUARDIAN NAME PRINTED

X _____

WITNESS EMERGENCY PHONE NUMBER

EMAIL ADDRESS: _____

Waiver valid until _____ (trying out club) or _____ season for full members.

October 1, 2014