

# CLASS REGISTRATION FORM & RELEASE AND WAIVER OF LIABILITY

Participant's Name: \_\_\_\_\_

DATE OF BIRTH (Y/M/D): \_\_\_\_\_

Course Date: \_\_\_\_\_

In consideration of being allowed to participate in event, programs, or activities organized, operated, and conducted on \_\_\_\_\_ property, the undersigned acknowledges, appreciates and agrees that:

I, \_\_\_\_\_, am taking legal responsibility for my participation in this event, program, or activity.

I confirm that I am in proper physical, emotional, and psychological condition and health to participate in this event. I am responsible to myself with equipment and am responsible for its safety and good operating condition. I am aware that wearing a CSA, CPSC or Snell approved helmet is required whenever I am riding a bicycle in this event.

I understand that my participation in this event may involve risk of injury or damage to property, including but not limited to: abrasions, bruises and cuts to skin and/or flesh, and injuries to bones, muscles, ligaments, tendons, joints, nerves, eyes, ears, teeth and internal organs, including concussion, or even death, resulting from, for example, falls from bicycles or collisions with other cyclists, bicycles, or other objects or fixtures, and I for myself and behalf of my heirs, assigns, personal representatives and next of kin, **HEREBY RELEASE AND HOLD HARMLESS** The Corporation of the City of Thunder Bay, Thunder Bay Police Services Board, EcoSuperior Environmental Programs, Lakehead University and their officers, officials, agents, volunteers and/or employees, other participants, sponsoring agencies, sponsors, advertisers for all claims for injury, disability, death or loss or damage to person or property that might result from my participation at the event.

I understand that I must conform to all instructions of the event instructors and that his/her failure to do so may result in dismissal from the event without compensation.

**I HAVE READ AND UNDERSTAND THE ABOVE AND HAVE BEEN PROVIDED OR OBTAINED SUFFICIENT INFORMATION TO MAKE AN INFORMED DECISION ABOUT MY INVOLVEMENT. I RECOGNIZE THAT BY SIGNING THIS DOCUMENT I AM WAIVING CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE. I SIGN THIS DOCUMENT VOLUNTARILY AND WITHOUT INDUCEMENT.**

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Participant Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Witness Printed Name

\_\_\_\_\_  
Date

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Important Health Information: \_\_\_\_\_

Personal information on this form is collected under the authority of the Municipal Act and will be used to maintain a record of program registration. Questions about this collection should be directed to the City of Thunder Bay Active Transportation Coordinator, EcoSuperior Environmental Programs, 562 Red River Road, Thunder Bay, ON P7B 1H3, Telephone: (807) 625-2163