



Let's Run Fast Registration

\$50

8 Weeks, Tuesdays beginning April 10th
6:30 pm at the Sportplex Track

Required Fields Marked with *

Name:* _____

Date of Birth (dd/mm/yy)*: _____ Age: _____

Address* _____ Postal Code*: _____

Home Phone: _____ Cell Phone: _____

Email*: _____

Emergency Contact Name*: _____

Emergency Contact Number*: _____

Par-Q Form Completed

Paid



Waiver and Release

I know that I am participating in a potentially hazardous activity and I should not participate unless I am medically able to do so. I realize that running, swimming, and cycling are physically strenuous, that there may be adverse weather conditions and that there may be vehicles present on the course and intersections. I nevertheless wish to participate and assume any and all risks associated with participating in this activity. Knowing these facts in consideration of your accepting my registration, I hereby for myself, or for anyone else who may claim on my behalf, agree not to sue and waive, release and discharge all persons participating in the operation of this event including without limitations A&L Get Active, A&L Get Active staff, volunteers or anyone acting on behalf of A&L Get Active for any and all claims, demands, causes of action, damages, or injuries, whether caused by negligence of the Releasee, or by any other case which may arise as a result of or out of my participation in this event. I also indemnify and hold harmless the Releasee from any liability incurred by them and caused by myself. I attest that my general health is sufficient to participate in this program without obligation or compensation to me. As part of this waiver and release I acknowledge that I have read and understood all of the above.

Applicant please sign here:

Date:

X _____
