**West Neighbourhood House**

**Scotiabank Toronto Waterfront Marathon**

**Sunday, October 22nd, 2017**

**Charity Challenge Registration Form**

**Name: Email:**

**Address: City:**

**Postal code: Phone Number:**

**Date of Birth: (day/month/year) Age on Race Day:**

**Gender:**

**Relationship to West NH: € Staff € Volunteer € Program participant € Supporter**

**If program participant or volunteer, which program?:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I wish to walk/run: € 5 km € Half Marathon (21.1 km) € Full Marathon (42.2 km)**

**T-shirt Size: (small, medium, large or x-large)**

**Estimated time to finish 5 km, Half or Full Marathon: (hours & minutes)**

**Have you run the STWM before? If so, how many times before this year?**

**Emergency Contact: Name Phone** #

**Medical Conditions**

**Below are the Charity Challenge entry fees for this year (all amounts include tax and processing fees):**

**5 km for adults** - $49.93 **Half Marathon** - $98.46

**5 km for adult and baby stroller**- $62.06 **Marathon** - $98.46

* West NH staff, volunteers, participants, and supporters are asked to please pay the full entry fee up front. You may pay fee my cash, cheque, or credit card.
* If you fundraise more than $150, you can ask to have your entry fee reimbursed.

**Fee Attached: € Cash € Cheque (payable to West Neighbourhood House) € Waived**

**Release Waiver:**

Please read any waiver carefully. It includes a release of liability and waiver of legal rights and deprives you of the ability to sue certain parties. Do not agree to this document unless you have read and understood it in its entirety. By agreeing, you acknowledge that you have both read and understood the text presented to you as part of the registration process. You also understand and agree that events carry certain inherent dangers and risks which may or may not be readily foreseeable, including without limitation personal injury, property damage or death. Your ability to participate in the event(s) is/are subject to your agreement to the waiver and by agreeing herein, you accept and agree to the terms of the waiver and release agreement.

**I understand that my entry is non-refundable and non-transferrable to another CRS event or the following year’s event.**

**I understand that if I selected to donate or fundraise for a participating charity, they may contact me with more information on fundraising and race participation at Canada Running Series events.**

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**Charitable Registration No. 11925 7525 RR0001**

**Release Waiver And Indemnity**

In consideration of the acceptance of my application and the permission to participate as an entrant or competitor in the 2016 Canada Running Series. I for myself, my heirs, executors, administrators, successors, and assigns HEREBY RELEASE, WAIVER AND FOREVER DISCHARGE The City of Toronto, The Toronto Police Service, The Toronto Police Services Board, The Chief of Police, The Members of the Toronto Policy Auxiliary Program, The Toronto Transit Commission, GO Transit, Athletics Canada Inc., OTFA, ORA, Canada Running Series Inc. (1399662), Canada Running Series Foundation & their respective Directors, Scotiabank, Banque Scotia, A. Lassonde Inc., Canadian Ski Patrol and its members, Running Room, Enercare Inc., Maple Leaf Sports & Entertainment Ltd., BPC Coliseum Inc., and their respective Directors, Officers and Employees, Pepsi QTG, Aquafina, Grenadier Café & Teahouse, Sports Technology and Timing Systems Limited (Sportstats), Post Foods Canada, High Park Nature Centre, DISCHARGE the Ville de Montreal and Parc Jean-Drapeau, La Ronde and Six Flags, Fédération québécoise d’athlétisme, ASICS Canada, Boutique Endurance, St. John Ambulance Saint-Jean/Ambulance St. Jean, Urgences Santé, Liberté Inc, Metro Toronto Zoo, Board of Management of the Toronto Zoo, Toronto and Region Conservation Authority, and all other associations, sanctioning bodies and sponsoring companies, and elected and appointed officials, successors and assigns, OF AND FROM ALL claims, demands, damages, costs, expenses, actions and causes of action, whether in law or equity, in respect of death, injury, loss or damage to my person or property HOWSOEVER CAUSED, arising or to arise by reason of my participation in the said event, whether as a spectator, participant, competitor or otherwise, whether prior to, during or subsequent to the event AND NOTWITHSTANDING that same may have contributed to or occasioned by the negligence of the aforesaid. I hereby agree to periodic mailings, both electronic and physical, CRS, and to allow the use of any photographs taken of me in the run, by the organizers, for future event promotional purposes. Such photos not to be used for any other commercial or re-sale purposes. I FURTHER HEREBY UNDERTAKE TO HOLD AND SAFE HARMLESS AND AGREE TO INDEMNIFY all of the aforesaid from and against any and all liability incurred by any or all of them arising as a result of, or in any way connected with my participation in the said event.   BY SUBMITTING THIS ENTRY, I ACKNOWLEDGE HAVING READ, UNDERSTOOD, AND AGREE TO THE ABOVE WAIVER, RELEASE and INDEMNITY. I WARRANT that I am physically fit to participate in this event.

**BY CHECKING THE FOLLOWING BOX** **I ACKNOWLEDGE HAVING READ, UNDERSTOOD, AND AGREE TO THE ABOVE WAIVER, RELEASE and INDEMNITY: €**

**The above box must be checked in order to register**

**Please email completed forms to Kaleigh Wisman at** [**kaleighwi@westnh.org**](mailto:kaleighwi@westnh.org) **or**

**fax to 416-504-3047**

**Thank you for your participation!**

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**Charitable Registration No. 11925 7525 RR0001**