

GREAT WATERFRONT TRAIL ADVENTURE, 2019

Release Waiver and Indemnity

Please read and sign

Bike Plate Number

In consideration of the acceptance of my entry, I, for myself, my heirs, executors and administrators, do hereby release and forever discharge the Waterfront Regeneration Trust and its officials, volunteers, sponsors and any other parties connected with the Great Waterfront Trail Adventure (GWTA) cycling tour, from all claims for damages, death, personal injury or loss of property I may have as a result of my participation in the Great Waterfront Trail Adventure cycling tour being held between Saturday July 27th and Friday August 2nd, 2019.

I am aware that the GWTA cycling tour may contain some risks, including the risk of falling, collision with other bicycles, motor vehicles or stationary objects, the effects of weather conditions, and the conditions of the road and trails. I voluntarily assume all risks of loss, damage or injury that may be sustained while participating in the GWTA. I hereby consent to and permit emergency treatment in the event of injury or illness. I attest that I am physically capable and sufficiently trained to ride in the GWTA. I attest that the equipment will I will use is in good mechanical condition.

I UNDERSTAND THAT BICYCLE HELMETS CAN PREVENT SERIOUS INJURY AND I AGREE TO WEAR ONE WHILE PARTICIPATING IN THIS EVENT and at no time will I wear anything such as a baseball cap or headphones that may inhibit the correct use of a properly worn helmet.

I agree to obey all Ontario Highway Traffic Act laws, I agree not to sue and I further agree to indemnify and save harmless the Waterfront Regeneration Trust and its officials, volunteers, sponsors and any other parties connected with the GWTA cycling tour from all expenses, fees, liability or damage award or cost of any type whatsoever arising from my participation in this event. I have read and understand everything that is written above and I voluntarily sign this agreement.

Signature of Participant: _____ Date: _____

MINORS: Individuals under the age of 18 must obtain the SIGNATURE OF A PARENT OR GUARDIAN. By signing this release, I as a parent or guardian of the minor participant above, hereby give permission for my child or ward to participate in the GWTA cycling tour and I further agree individually and on behalf of this minor to the terms of this release.

Name of Parent or Guardian (please print): _____

Signature of parent or guardian (if under 18): _____

<p>Photo Release</p> <p>Your photo(s)/video are the property of the Waterfront Regeneration Trust (WRT) and may be used to promote the Great Lakes Waterfront Trail. The WRT may use the photo(s)/video in any of its promotional media and may provide the photo(s)/video to their partners for the same promotional purposes.</p> <p>I hereby consent to and authorize the WRT to take, use and disclose for the purpose outlined above the photo(s)/video as taken on the Great Waterfront Trail Adventure 2019.</p> <p>Signature of Participant: _____</p> <p>Name of Parent or Guardian (please print): _____</p> <p>Signature of parent or guardian (if under 18): _____</p> <p>Date: _____</p>
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