



Scotiabank Cape to Cabot 20 km Race Kit Pick-Up Official Authorization Form

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I, _____
(full name)

of _____
(address)

am a duly registered participant of the Scotiabank Cape to Cabot 2011 Road Race. I am unable to pick up my race kit during the specified time frame, and herewith, I authorize:

_____ (full name)

of _____ (address)

and holding Driver License Number _____ to pick-up my race kit on my behalf.

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PHOTO RELEASE

I hereby grant the NLAA permission to use my image in good taste in promotional materials, posters, Web sites and other merchandise. I release NLAA from all liability of any nature in the use of any electronic or film image and or audio for advertising purposes.

PARTICIPANT CONSENT FOR COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION

The NLAA understands the importance of protecting your personal information and compliance with government regulations. The NLAA collects "public" and "personal" information such as contact information, gender and date of birth to enable us to contact you and maintain communication with you; to provide accurate results and statistics. I agree that the NLAA can collect, use and disclose personal information about myself as set out above.

I, for myself, my heirs, executors, administrators, successors and assigns HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE THE NEWFOUNDLAND AND LABRADOR ATHLETICS ASSOCIATION, ATHLETICS NORTH-EAST RUNNING CLUB, HOST VENUE, CITY OF ST. JOHN'S and all other associations, sanctioning bodies and sponsoring companies, and all their respective agents, officials, servants, contractors, representatives, successors and assigns OF AND FROM ALL claims, demands, damages, cost, 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 been contributed to or occasioned by the negligence of any of the aforesaid.

I FURTHER HEREBY UNDERTAKE to HOLD AND SAVE 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 AGREED to the above WAIVER, RELEASE AND INDEMNITY. I WARRANT that I am physically fit to participate in this event.

IF THIS WAIVER IS ALTERED THE REGISTRATION WILL BE REJECTED. Please fill out the form completely and SIGN below.

KIT PICKUP AUTHORIZATION

I understand that race organizers, the NLAA, race sponsors and contributors cannot be held liable for a missing race kit or items once they surrender the race kit and its contents to the person picking up my race kit identified above.

Signature of Registered Race Participant

Date

③

I agree to give the race kit and its entire contents to the person on whose behalf I am picking up this race kit. I have verified that the race kit includes all items including race technical shirt, race bib number, safety pins, luggage tag, and reception ticket.

Signature of Person Picking Up Race Kit

Date