

**TRIATHLON ONTARIO AND WOODSTOCK TRIATHLON CLUB RELEASE OF LIABILITY,  
WAIVER OF CLAIMS AND INDEMNITY AGREEMENT WARNING! By signing this document you  
will waive certain legal rights, including the right to sue. Please read carefully.**

This is a binding legal agreement. In CONSIDERATION of the acceptance of my child's application for registration as a Participant in the KIDS DU, the undersigned acknowledges and agrees to the following terms:

**Description of Risks**

1. In consideration of my child's participation in the KIDS DU, I hereby acknowledge that I am aware of the risks and hazards associated with or related to any such triathlons, duathlons, and multisport events. The risks and hazards include, but are not limited to, injuries from:

- a. Swimming, biking and running;
- b. Executing strenuous and demanding physical techniques;
- c. Vigorous physical exertion, strenuous cardiovascular workouts, rapid movements, quick turns and stops;
- d. Exerting and stretching various muscle groups;
- e. Entering the water by either diving or jumping;
- f. Extended time in water and underwater;
- g. Extreme weather and temperature conditions which may result in dehydration, heatstroke, sunstroke or hypothermia;
- h. Mounting, dismounting or falling off a bicycle;
- i. Falling or colliding with the ground, walls, stands, equipment or with other participants;
- j. Falling due to uneven or irregular terrain or surfaces;
- k. Failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment;
- l. Contact or being struck by other participants, spectators, equipment or vehicles;
- m. Spinal cord injuries which may render me permanently paralyzed;
- n. Travel to and from the KIDS DU event;

I agree to the above

2. Furthermore, I am aware:

- a. That injuries sustained can be severe;
- b. That I may experience anxiety while challenging myself during the multisport events;
- c. That I may come into close contact with other participants;
- d. That my risk of injury is reduced if I follow all rules established for participation and competition; and
- e. That my risk of injury increases as I become fatigued.

I agree to the above

**RELEASE OF LIABILITY AND DISCLAIMER**

3. In consideration of TRIATHLON ONTARIO and WOODSTOCK TRIATHLON CLUB allowing me to participate, I agree:

- a. That my physical condition has been verified by a medical doctor within the past twelve months and I am medically cleared to participate;
- b. To assume all risks arising out of, associated with or related to my participation and am fully aware of the nature of these risks including personal injury, death, property damage expense and related loss, including loss of income;

c. To be solely responsible for any injury, death, loss, including loss of income or damage that I might sustain while participating;

d. To RELEASE, DISCHARGE, SAVE HARMLESS AND INDEMNIFY TRIATHLON ONTARIO, WOODSTOCK TRIATHLON CLUB, and their respective directors, officers, committee members, members, employees, volunteers, officials, judges, participants, sponsors, facilities where the activity occurs, agents and representatives from any and all liability, for any and all claims, demands, actions, judgments, executions and costs that might arise out of my participating, even though any such risks, injuries, loss, damage, claims, demands, actions or costs may have been caused by any manner whatsoever, including but not limited to, the negligence, breach of contract or breach of any statutory duty of care of TRIATHLON ONTARIO OR WOODSTOCK TRIATHLON CLUB.

e. Acknowledgement

4. I acknowledge that I have read and understand this agreement, that I have executed this agreement voluntarily, and that this agreement is to be binding upon myself, my heirs, executors, administrators and representatives.

g. Privacy Waiver

h. I consent to WOODSTOCK TRIATHLON CLUB using my child's picture strictly for advertising purposes and my mailing address for advertising other club activities. WOODSTOCK TRIATHLON CLUB does not release names, e-mail addresses or phone numbers to any third party. **By typing in your name below and clicking the "I Agree" icon, you agree to be bound this Agreement.**

I acknowledge that I have read and understand this waiver

Enter your [parent's] full name to confirm agreement ON BEHALF OF YOUR CHILD

Participant Name:	Parent Name:
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The parent must complete one waiver for each child in your family or group or team.

