

FOOTHILLS SPEED SKATING MARATHON ASSOCIATION

Organizers

SPITZ SYLVAN LAKE ICE MARATHON

Saturday, March 3, 2007



Entry and Waiver Form

(return to: FSSMA, Box 249, Penhold, AB, T0M 1R0, or fax: 403 886-2975)

Name of participant: _____ Sex: M F

Address: _____
(street) (city) (province/state)

_____ Date of Birth: _____ / _____ / _____
(country) (postal/zip code) day month year

Telephone: _____ Email: _____

RACE/TOUR EVENTS (please checkmark the events you want to compete in)

- Spitz Sylvan Lake Ice Marathon, 100 km Race for Men & Women (all ages),
Entry Fee: \$50.00 (Cdn) _____
- Spitz Sylvan Lake Ice Marathon, 25 km Race for Boys & Girls (18 yrs. & under)
Entry Fee: \$10.00 (Cdn) _____
- Spitz Sylvan Lake Ice Marathon, 5 – 50 km Fun Tour.
(The skater has the opportunity to skate a minimum of 5 km and a maximum of 50 km)
Entry Fee: \$10.00 (Cdn). *Kids 16 years and under skate FREE in Tour!* _____

(Payments can be made by cheque or cash. Cheques to be made payable to FSSMA)

WAIVER

By signing this form and in consideration of being granted entry to the foregoing event, the Participant (or the Participant's parent or guardian) on behalf of the Participant and his/her heirs, executors, administrators and assigns hereby waive and release and forever discharge the Foothills Speed Skating Marathon Association, Speed Skating Canada, the Alberta Amateur Speed Skating Association, the University of Calgary and all other persons involved with the sponsorship and organization of the Sylvan Lake Marathon 2007 and the directors, officers and employees, volunteers of each of them of and from all actions, claims and suits of any kind whatsoever related to the Participant's participation in the Sylvan Lake Marathon 2007, including but not limited to claims for personal injury or loss of property.

The Participant and where applicable, the Participant's parent or guardian, specifically acknowledge and agree that the Participant will participate in the Sylvan Lake Marathon 2007 at the Participant's own risk.

USE OF ENTRY FORM

By signing this form, the Participant and their parent/guardian, where applicable, acknowledge and agree as follows:

The information on this form is collected in accordance with the provisions of the Freedom of Information and Protection of Privacy Act. It is required to register you in the competition and will be used to contact you regarding future competitions by the Foothills Speed Skating Marathon Association. Financial information will be used to process payment. Organization of competitions requires that names will appear on posted lists and results printouts. Names/Pictures of Participants may be published on boards, media and in newsletters.

If you have questions about the collection or use of this information, contact the Events Organizers at (403) 886-2980.

Signed on this _____ day of _____, 200__.

Signature of Participant

Signature of Parent/Guardian
(if Participant is 18 years and under)
