



CTAC Athlete Test Drive Information and Waiver

Please take a moment to read this document and fill in the required information below. This information allows our coaches to keep track of athletes that are joining us for the first time.

Please send this form to our club manager at info@centraltorontoac.ca.

For insurance purposes, you will be required to pay for a Recreational Membership with Athletics Ontario in order to do a test drive (\$5 if born in 2009 or later and \$20 if born in 2008 or earlier). These fees can be used toward a full Athletics Ontario membership at a later date.

Athlete's Name: _____

School Grade: _____

Year of Birth: _____

Contact Parent's name: _____

Phone Number: _____

Email Address: _____

By agreeing to this document you will waive certain legal rights, PLEASE READ CAREFULLY.

IN CONSIDERATION of participating in, or allowing my minor child/ward to participate in the athletic events of CTAC, I ASSURE TO YOU THAT:

1. I, or as the undersigned Guardian I am the parent/guardian of the participant having full legal responsibility for decisions regarding the participant.
2. I believe that I or my minor/ward am physically, emotionally and mentally able to participate in the programs, activities and events of the CTAC.
3. I hereby acknowledge that I am aware of the risks and hazards associated with or related to the athletics events of CTAC. The risks and hazards include, but are not limited to injuries from:

- a) 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) Extreme weather and temperature conditions which may result in dehydration, heatstroke, sunstroke or hypothermia;
 - f) Falling or colliding with the ground, walls, stands, equipment or with other participants;
 - g) Falling due to uneven or irregular terrain or surfaces;
 - h) Failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment;
 - i) Contact or being struck by other participants, spectators, equipment or vehicles;
 - j) Spinal cord injuries which may render one permanently paralyzed;
 - k) Travel to and from competitive events and associated non-competitive events which are an integral part of CTAC's races, activities and events.
4. Furthermore, I am aware that:
- a) Injuries sustained to myself or my child/ward can be severe;
 - b) I or my child/ward may experience anxiety while challenging himself/herself during the competitions, activities, events and programs;
 - c) I or my child/ward may come into close contact with other participants;
 - d) I or my child/ward's risk of injury is reduced if I/he/she follows all rules established for participation; and
 - e) I or my child/ward's risk of injury increases as I/he/she becomes fatigued.

I UNDERSTAND AND AGREE, on behalf of myself, my heirs, assigns, personal representatives and next of kin that my signing of this document constitutes that:

5. I am registering myself or my child/ward willingly and I/my child/ward is participating voluntarily in these activities, events and programs.
6. I agree that there are risks as described above and I/my child/ward will be exposed to these risks and hazards.
7. I agree to accept and assume all these risks and hazards and am responsible for any injury or other loss which I or my minor child/ward might receive while participating in these athletic events.
8. If something happens to myself/my child/ward, I RELEASE the CTAC of responsibility and liability for any and all claims, demands, actions, judgements, executions and costs which might arise out of my or my child/ward's participation. I understand CTAC to mean:Central Toronto Athletic Club and respective directors, officers, committee members, members, employees, volunteers, officials, judges, participants, sponsors,facilities where the activity occurs, agents and representatives. I ACKNOWLEDGE MAKING THIS AGREEMENT I have read and understood the terms and conditions of this agreement, and by checking the AGREE BOX voluntarily below, I am agreeing to abide by these terms.

Parent's Signature (or athlete signature if athlete is 18 years of age or older)

Date