

REGISTRATION FORM (please print clearly)

Rider Name:		DVD 0.00	1.405	LACID	
	FIRST		LAST	LAST	
Company Name	2:				
Address	s:				
		STREET ADDRESS	ON	APT/UNIT #	
		CITY	PROVINCE	POSTAL CODE	
Phone #	#:	Email:			
Additional Gu	iests				
Passenger N	lame:				
		FIRST	LAST		
				er \$50 = \$ er \$25 = \$	
	Your registrati	on fee will be refunded with	over \$200 in pledges.		
Payment					
□ Cash*	□ Cheque*	*Cheque or cash can be mailed	or dropped off at the address	s below.	
□ Visa	□ Mastercard	□ American Express	□ Square		
Name as it app	pears on card:				
Card number:		Expiry date:			
Signature:					

*PLEASE TURN OVER FOR WAIVER

PLEASE FORWARD COMPLETED FORM BY E-MAIL, FAX OR MAIL TO:

ATTN: IRENA KROPMAN

HEARTH PLACE CANCER SUPPORT CENTRE

86 COLBORNE STREET WEST, OSHAWA ON L1G 1L7 WWW.HEARTHPLACE.ORG TEL: (905) 579-4833, FAX: (905) 579-1204 OR E-MAIL: IRENA@HEARTHPLACE.ORG FEDERAL CHARITABLE NO. 89280 8478 RR0001





Waiver

IN CONSIDERATION of the acceptance of my application and the permission to participate as an entrant or competitor in Ride for Hearth Place (the "event") on Sunday, June 25, 2017 (or September 10, 2017). I, for myself, my heirs, executors, administrators, successors, and assigns HEREBY RELEASE, WAIVE, AND FOREVER DISCHARGE Hearth Place Ride Committee and all other associations, sanctioning bodies and sponsoring companies, and other elected or appointed officials, involved or associated in anyway with the event and their respective successors and assigns, OF AND FROM ALL claims, demands, damages, costs, expenses, actions and causes of action, whether in low or equity, in respect of death, injury, loss or damage to my person or property HOWSOEVER CAUSED, arising or to arise in anyway whatsoever by reason of my participation in the said event, whether as spectator, participant, competitor or otherwise, whether prior to, during or subsequent to the event AND NOTWITHSTANDING that some may have been contributed to, or occasioned by, the negligence of the aforesaid. I UNDERSTAND that I am expected to abide by and adhere to all rules and regulations of the road, as stated by the Ministry of Transportation of Ontario.

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 event.

BY SUBMITTING this application, IACKNOWLEDGE HAVING READ, UNDERSTOOD, AND AGREED TO THE ABOVE WAIVER, RELEASE and INDEMNITY. I WARRANT that I am physically fit to participate in this event.

Passenger:		Rider:	Rider:	
	NAME		NAME	
	SIGNATURE		SIGNATURE	



