

PLEASE READ CAREFULLY

RELEASE OF LIABILITY, WAIVER OF ALL POSSIBLE CLAIMS AND ASSUMPTION OF RISK

Warning: By choosing to participate in any Runners with Attitude activities you are waiving your legal rights and you give up the right to sue.

PARTICIPANT(S) NAME(S): All persons involved in ANY and ALL FORMS of activities lead by Runners with Attitude

ACTIVITY: All activities sponsored by or organized by or through Runners with Attitude, including but not limited to the Introduction to Trail Running Course.

I desire to participate in the above activities sponsored or organized by Runners with Attitude. I understand that in order for Runners with Attitude to allow me to participate in the above activities, I must agree to be bound by this Release, Waiver and Assumption of Risk.

In consideration of my being permitted to participate in the above activities, I must agree to this Release, Waiver and Assumption of Risk.

I waive any and all claims I may now and in the future have against, and release from all liability and agree not to sue Runners with Attitude, its officers, sanctioning body, instructors, leaders (volunteer or other), agents or representatives (collectively the "Released Parties") for any personal injury, death and property damages, expenses or loss sustained by me as a result of my participation in the above activities.

I am aware that there are serious dangers and risks inherent in running trails in remote places, on difficult terrain and in various weather conditions.

I accept all the inherent risks of the above activities and the possibility of personal injury, death, property damage or loss resulting there from.

I agree that I will be fully responsible for all costs and expenses which may be incurred in providing any special services to myself, outside of regular services agreed to or provided by the Released Parties in connection with the activities, and without limiting the generality of the foregoing, I agree to be responsible for and to pay for all and any costs of rescues, special travel, medical attention or other special outlay for myself personally, and to reimburse the Released Parties and its staff for all costs of these services as may be incurred by them for my benefit or at my request.

In entering into this agreement, I am not relying on any oral, written or visual representations or statements made by the Released Parties to induce me to participate in the above activity.

I confirm that I am the full age of majority or, in the alternative, I have indicated that I am the guardian of the minor participant named, and that I have read and understand this agreement and agree that this agreement will be binding upon me (as participants or guardians), my heirs, next of kin, executors, administrators and successors.

Please select and sign below:

I have read the above, and agree to the risk, and I am a member of Athletics Alberta.

I have read the above, and agree to the risk, and I am NOT a member of Athletics Alberta.

Please place a mark in the appropriate box below:

Print Name: _____ Signature: _____ Date: _____