



Okanagan College Half Marathon Relay Waiver form

Team name:

Individual name:

Waiver:

In consideration of Okanagan College, the City of Kelowna, Event Sponsors, Volunteers and Organizers accepting this entry, I hereby for myself, my heirs, executors and administrator, waive and release any and all right and claim for damages sustained by me as a result of this run, for any cause whatsoever, including negligence. It is expressly understood by the undersigned that this run is entered into at the sole risk of the undersigned and that the Organizers and Sponsors of the run are exempt from liability for any and all damages sustained and any and all injury and loss, including personal and property loss arising from any cause whatsoever, including negligence. This 1/2 marathon relay is a serious event for which all athletes should be properly prepared and athletes under the age of 19 should not be encouraged to participate.

Signature: _____ Date: _____
(Signature of parent or guardian is required if runner is under 19 years of age.)

<i>OFFICE USE ONLY</i>					
<input type="checkbox"/> paid	\$ amount _____	<input type="checkbox"/> cash	<input type="checkbox"/> cheque	Race Number _____	Entered _____ (initial)