



Strides for Strokes and Awareness B.L.A.S.T.



Sunday, June 23rd, 2013
Templeton Park Pool V5L 4X9

Participant Release and Waiver

Full name	Participant
street address, City, Province, Postal code	Branch
Email	Primary Phone

In consideration of my participation in the 2013 event, Strides for Strokes and Awareness BLAST,

I, _____ hereby, for myself, executors, administrators and personal representatives, release the organizers of this event, their agents and volunteers, the event sponsors, and the Stroke Recovery Association of B.C. including Templeton Branch, Parks Board Pool facility, and BLAST (Building Life After Stroke Together) from all liability, and I waive as against the organizers, agents, volunteers and the Stroke Recovery Association of B.C. including Templeton Branch and Parks Board Pool facility, all claims of any kind whatsoever that I might have for personal injuries or property losses suffered by participation in this event.

I certify that I have full knowledge of the risks involved in this event and I am physically able to participate, and that unless indicated to the contrary by the signature of the guardian below, I am 19 years or older. I hereby agree to allow any photographs to be taken of me on the walk to be used by the S.R.A.B.C. including Templeton Branch members and B.L.A.S.T. to publicize the event.

I have read or had the document read aloud to me, understand, and agree to the terms of this agreement.

Participant's Signature _____ Date _____

Witness Signature _____ Date _____

If under 19
Parent/Guardian's Signature _____ Date _____