

## Cape to Cabot 20 km Race Kit Pick-Up Official Authorization Form

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I,	(full name)
of	· · · · · · · · · · · · · · · · · · ·
(address) am a duly registered participant of the Cape to Cabot 2017 Road Race. I am unable to pick up my race kit during the specified time frame, and herewith, I authorize:	
of	(full name)
	(address)
and holding Driver License Number	to pick-up my race kit on my behalf.
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PHOTO RELEASE I hereby grant the NLAA permission to use my image in good to NLAA from all liability of any nature in the use of any electron	aste in promotional materials, posters, Web sites and other merchandise. I release ic or film image and or audio for advertising purposes.
PARTICIPANT CONSENT FOR COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION  The NLAA understands the importance of protecting your personal information and compliance with government regulations. The NLAA collects "public" and "personal" information such as contact information, gender and date of birth to enable us to contact you and maintain communication with you; to provide accurate results and statistics. I agree that the NLAA can collect, use and disclose personal information about myself as set out above.	
NEWFOUNDLAND AND LABRADOR ATHLETICS ASSOVENUE, CITY OF ST. JOHN'S and all other associations, sa officials, servants, contractors, representatives, successors and a and causes of action, whether in law or equity, in respect of dea arising or to arise by reason of my participation in the said even	d assigns HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE THE OCIATION, ATHLETICS NORTH-EAST RUNNING CLUB, HOST nctioning bodies and sponsoring companies, and all their respective agents, assigns OF AND FROM ALL claims, demands, damages, cost, expenses, actions th, injury, loss or damage to my person or property HOWSOEVER CAUSED, it, whether as a spectator, participant, competitor or otherwise, whether prior to, if that same may have been contributed to or occasioned by the negligence of any
	HARMLESS AND AGREE TO INDEMNIFY all of the aforesaid from and ag as a result of, or in any way connected with my participation in the said event.
BY SUBMITTING this ENTRY, I ACKNOWLEDGE HAVING READ, UNDERSTOOD AND AGREED to the above WAIVER, RELEASE AND INDEMNITY. I WARRANT that I am physically fit to participate in this event.	
IF THIS WAIVER IS ALTERED THE REGISTRATION WIL	L BE REJECTED. Please fill out the form completely and SIGN below.
	ace sponsors and contributors cannot be held liable for a e race kit and its contents to the person picking up my race
Signature of Registered Race Participant	Date
8	s to the person on whose behalf I am picking up this race kit. is including race technical shirt, race bib number, safety pins,
Signature of Person Picking Up Race Kit	