



SAL GUZZO, LL.B.
PROFESSIONAL CORPORATION
BARRISTERS & SOLICITORS

Team Relay Challenge Entry Form

Write Team Name Above (This name will be printed on your bibs)

TEAM REGISTRATION CLOSES: WEDNESDAY, APRIL 19th, 2017

Team Captain/Main Contact
 Last Name: _____ First Name: _____ Male ___ Female ___
 Address: _____ City _____ Postal Code _____
 Tel: _____ D.O.B. (dd/mm/yyyy): ___ / ___ / _____ Email _____
 SIGNATURE (Parent/Legal Guardian Signature if under 18 yrs): _____ I agree to waiver (please check): ___

Team Member #2
 Last Name: _____ First Name: _____ Male ___ Female ___
 Address: _____ City _____ Postal Code _____
 Tel: _____ D.O.B. (dd/mm/yyyy): ___ / ___ / _____ Email _____
 SIGNATURE (Parent/Legal Guardian Signature if under 18 yrs): _____ I agree to waiver (please check): ___

Team Member #3
 Last Name: _____ First Name: _____ Male ___ Female ___
 Address: _____ City _____ Postal Code _____
 Tel: _____ D.O.B. (dd/mm/yyyy): ___ / ___ / _____ Email _____
 SIGNATURE (Parent/Legal Guardian Signature if under 18 yrs): _____ I agree to waiver (please check): ___

Team Member #4
 Last Name: _____ First Name: _____ Male ___ Female ___
 Address: _____ City _____ Postal Code _____
 Tel: _____ D.O.B. (dd/mm/yyyy): ___ / ___ / _____ Email _____
 SIGNATURE (Parent/Legal Guardian Signature if under 18 yrs): _____ I agree to waiver (please check): ___

Team Member #5
 Last Name: _____ First Name: _____ Male ___ Female ___
 Address: _____ City _____ Postal Code _____
 Tel: _____ D.O.B. (dd/mm/yyyy): ___ / ___ / _____ Email _____
 SIGNATURE (Parent/Legal Guardian Signature if under 18 yrs): _____ I agree to waiver (please check): ___

	by Nov. 2 nd	by Feb. 8 th	by Mar. 29 th	by Apr. 19 th
Entry Fee	\$200.00	\$225.00	\$275.00	\$300.00
HST	\$26.00	\$29.25	\$35.75	\$39.00
TOTAL	\$226.00	\$254.25	\$310.75	\$339.00

I give permission for Landmark Sport Group to contact me via email, for event details: Yes No

WAIVER, RELEASE AND INDEMNIFICATION (Each team member must agree to waiver in above entry box.)

In consideration of the acceptance of my application and the permission to participate as a volunteer or competitor in the Mississauga Marathon, in any or all of the following events: the Full Marathon, Sal Guzzo, LL.B. Relay Challenge, Half Marathon, MNP 10KM, 10KM Student Relay, Novo Nordisk® "Hazel" 5KM, 2KM Fun Run/Walk, post-race activities on Saturday, May 6th and Sunday, May 7th, 2017 and any other 2017 Mississauga Marathon activities that take place prior to or after the event. I, for myself my heirs, executors, administrators, successors and assigns, hereby release, waive and forever discharge The City of Mississauga, the Peel Regional Police, the Chief of Police, the Mississauga Transit Commission, the Ministry of Transportation of Ontario, all sponsors and contributors, Landmark Sport Group Inc. and its employees and volunteers, the Mississauga Marathon Organizing Committee, and all other associations, sanctioning bodies and sponsoring companies, and all their respective agents, officials, servants, contractors, representatives, elected and appointed officials, successors and assigns of and from all claims, demands, damages, costs, expenses, actions and causes of action, whether in law or equity in respect of death, injury, loss or damage to my person or property however caused, arising or to arise by reason of my participation in the said event, whether as a spectator, participant, competitor, volunteer or otherwise, whether prior to, during or subsequent to the event, and notwithstanding that same may have been contributed to, or occasioned by, the negligence of any of the aforesaid. When you participate in any event or volunteer during the 2017 Mississauga Marathon, the staff has the right to use your image for promotional and marketable purposes. 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 all of them 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 assist/participate in this event.

ALL ENTRIES ARE NON-REFUNDABLE & NON-TRANSFERABLE

All forms with payment **MUST BE RECEIVED** by the price increase date to pay that specific price.

Mississauga Marathon, Landmark Sport Group Inc., 5500 Rose Cherry Place, Mississauga, ON, L4Z 4B6
 Phone: 905-949-2931 Fax: 905-949-4984 Email: info@mississaugamarathon.com Website: www.mississaugamarathon.com