



WAIVER FORM - Youth

All participants must submit a signed waiver prior to racing. Completed waivers may be dropped off at:
Timms Community Centre @ 20399 Douglas Crescent or
Email: recreation@langleycity.ca

PARTICIPANT INFORMATION

LAST NAME

FIRST NAME

AGE ON RACE DAY

BIRTHDATE

GENDER

MAILING ADDRESS

CITY

POSTAL CODE

GUARDIAN INFORMATION

PARENT/GUARDIAN NAME

PHONE NUMBER

EMAIL ADDRESS

RELEASE & WAIVER

The undersigned in consideration of being permitted to participate in the City of Langley's 18th Annual TRI-IT Triathlon hereby releases and forever discharges the City of Langley, the race sponsors, the race volunteers, and all employees and agents from any liability for accident, injury or damage to persons or property however caused arising out of or in connection with my participating in the City of Langley's TRI-IT Triathlon. This release and indemnity shall apply even if injury or damage may have been contributed to or caused by the negligence of the above named groups and their agents from all and any damages caused by me as a result of my participation in the City of Langley's TRI-IT Triathlon.

Participant Name (Please Print): _____

Parent/ Guardian Name (Please Print): _____

Signature of Parent/ Guardian: _____ Date: _____



PHOTO CONSENT WAIVER AND RELEASE AGREEMENT

This document will affect your legal rights and ability to claim. Please read it carefully before signing.

I hereby grant permission to the City of Langley to use my photographic likeness in any and all of its exhibits, publications, all forms and media for advertising, trade and for any other lawful purposes. I also understand that if my photographic likeness is accessed on the City of Langley website, the photograph can be downloaded by any computer user. I further ACKNOWLEDGE and AGREE that the City of Langley has no control over the use and reproduction of my photograph by any such person and that I will not put forth any claims against the City of Langley in that regard.

I hereby grant permission to the City of Langley to use my photographic likeness in any exhibit or City of Langley publication such as marketing and public relations material, newsletters, brochures, view books, promotional items, published reports, the Word Wide Web and for any other lawful purposes, without further consideration.

Personal contact information will be treated as confidential, subject to any statutory requirements or lawful orders or directives, unless you consent in writing to a further request for its release.

Participant's / Child's Name	Age of Participant / Child

Signature (or Parent's Signature – for child 18 yrs and under)

Date

Email or other Contact Address

Phone Number

(For City of Langley Office Use Only)

Activity/Event & Location: 2018 TRI- IT Triathlon

Photo Description (of person): (Bib #) _____

Photographer Name: _____ Phone Number: _____

Photo Title or Number: -----

Location in (P:) Drive: -----