

**CCO/Walden Cross Country Fitness Club Para Nordic Dryland Training Camp:**

Location: Naughton Trails

**Hosted By:**

**WCCFC, CCO and NOD**

For more information contact:

Patti Kitler – [pattikit@gmail.com](mailto:pattikit@gmail.com) - 705-692-3818

Ages 12 and up

**Items to Bring:**

- Water bottle.
- clothing appropriate for being outdoors in the fall: Gloves, toque, warm jacket/pants
- Sunglasses, hat, sunblock.
- Extra Food - post workout snacks and Water
- Personal items contact information
- note book for writing down ideas to train

**Registration Form: *Registration Deadline: October 12, 2011***

**Cost \$50 for the weekend**

Name: \_\_\_\_\_ participating as (circle): Athlete /

Coach

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Age: \_\_\_\_\_ Gender: M / F

There are two categories for people with disabilities to try for cross country skiing; Standing and Sitting. The organizers would like to give you the best possible experience to help you enjoy our sport. Please explain your disability and if you have any equipment of your own or wish to use the club's equipment.

**An example would be if you walk with canes and are not comfortable to try standing but are interested in trying sit skiing.**

Please explain your disability:

---

---

---

---

---

---

Rental equipment:

Sit ski:    yes       no       (sit skiing includes sled, skis and poles)

Skis, boots and poles for classic skiing:   yes       no

**PARTICIPANT FORM**

**ATTENTION:**

This **Participant Form** *must* be completed by each adult (**Part One and Part Two**) and each minor (an individual who is under the age of majority in his or her home province – **Part Two only**) who is participating in one or more of the competitions encompassed in the named Event.

**Attention Host Club:** Please have all **non-club members sign this form** when they are participating in a club-organized event. All club members having completed the Club Waiver and Acknowledgements Form need not complete this Participant Form when participating in their own club’s event.

The event name and dates should clearly indicate whether multiple competitions are involved in the Event.

Name of Event: **CCO PN Dryland Training Camp**

Event Date(s): **October 14 to 16, 2011**

IN CONSIDERATION OF **Cross Country Canada** (hereinafter called CCC), **Cross Country Ontario** (name of Ski Division, hereinafter called the **Host Division** , **Northern Ontario District** (name of Ski District, hereinafter called the **Host District**) and **Walden Cross Country Fitness Club** (name of hosting Club, hereinafter called the **Host Club**) accepting my entry for the above named activity and allowing my participation at the Event, I agree as follows:

**Part One - WAIVER and RELEASE (FOR ADULT REGISTRANTS ONLY)**

I hereby for myself, my heirs, executors, administrators and assigns, waive any and all claims that I have or may in the future have against **CCC, the Host Division, Host District and the Host Club**, their executive directors, servants, agents, sponsors, supporters, employees, contractors or volunteers (all of whom are hereafter the Releasees) and to release the Releasees from any and all liability for any loss, damage, expense or injury including death that I may suffer or my next of kin may suffer as a result of my participation in the Event, due to any cause whatsoever, including **negligence, breach of contract, or breach of any statutory or other duty of care owed on the part of the Releasees and further including failure on the part of the Releasees to safeguard or protect me from the risks, dangers and hazards associated with the Event as set out below in Part Two.**

I hold harmless and indemnify the Releasees from any and all liability for any property damage or personal injury to any third party resulting from my participation in the Event.

I further waive and release any and all recourse which I may now have or may in the future have resulting from any decisions of the Releasees in association with the Event, including any claims I might have in connection with any cancellation or rescheduling of the Event for whatever reason.

Date of Last Revision: October 7, 2010 17

**Minor Participant’s Signature**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

As the parent or guardian of a minor participant at the Event, I have read and understand the above Acknowledgements and accept the terms and conditions of participation on behalf of the minor and confirm all information is true and accurate.

**Minor’s Parent or Guardian Signature**

Name of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

**NOTE:**

Participant Forms are to remain with the **Host Club Executive for a minimum of three years.**

**DO NOT** submit these forms to **CCC** or the **Host Division** Office

Date