

WAIVER :

2023

I hereby release the Sun Life Pentathlon des neiges, their members and agents, all volunteers, partners, sponsors, and any other person connected with the Sun Life Pentathlon des neiges from all liability for any injuries, damages or losses. I acknowledge and understand that participation in this event involves risks to my health and safety, including death, and I willingly accept these risks. I also give full permission for use of my name and/or picture in connection with any publicity of this event.

Team's name : _____

CAPTAIN

#1 Participant's name :	_____	Emergency Contact :	_____
Zip code :	_____	Relationship :	_____
Phone :	_____	Phone :	_____
Signature :	_____		

I certify that my teammates have signed this form themselves.

TEAM'S MEMBERS

#2 Participant's name :	_____	Emergency Contact :	_____
Zip code :	_____	Relationship :	_____
Phone :	_____	Phone :	_____
Signature :	_____		

#3 Participant's name :	_____	Emergency Contact :	_____
Zip code :	_____	Relationship :	_____
Phone :	_____	Phone :	_____
Signature :	_____		

#4 Participant's name :	_____	Emergency Contact :	_____
Zip code :	_____	Relationship :	_____
Phone :	_____	Phone :	_____
Signature :	_____		

#5 Participant's name :	_____	Emergency Contact :	_____
Zip code :	_____	Relationship :	_____
Phone :	_____	Phone :	_____
Signature :	_____		