

## LEGAL GUARDIAN WAIVER & RELEASE YOUTH RIDE

l,		am	the	legal	guardian	of		(the	"Youth")
	(parent/guardian)						(child/ward)		

I give permission for the Youth to participate in the youth Ride for Cancer powered by BMO Bank of Montreal, organized and administered by the QEII Health Sciences Centre Foundation, and benefiting the QEII Foundation and the Leukemia & Lymphoma Society of Canada, a cycling challenge, scheduled to take place along the Rum Runners Trial and Highway 3 on September 28, 2019.

I confirm the Youth will be accompanied by an adult companion whom I trust to care for the Youth during the Ride for Cancer.

I understand that participating in/volunteering for such an Event, using public streets and facilities, and the use of and participation in services made available to the participants/volunteers during the event is a potentially hazardous activity and can result in serious injury or death. I am aware of and expressly assume, on behalf of the Youth and as the legal guardian of the Youth, all risks associated with the Youth's participation in this event, including without limitation, falls, and contact with other participants, bicycles, vehicles, and objects, the effects of weather, traffic and conditions of the routes used by the event, and I assert that the Youth is voluntarily participating in/volunteering for this event with my express consent.

In consideration for being permitted to participate in/volunteer for this event I, on behalf of the Youth and for anyone entitled to act on the Youth's behalf, hereby waive and release form any and all claims for injuries and damages the Youth may have arising out of the event or the Youth's participation in the event (including without limitation any pre-and-post event activities), against Ride for Cancer, the QEII Foundation, the Leukemia & Lymphoma Society of Canada and the Rum Runners Trail, and any beneficiaries, sponsors, officials, participating clubs, communities, organizations, friend of the event, participants, volunteers, employees, agents and representatives, including without limitation the Event medical sponsor.

I intend by this Waiver and Release to fully release, in advance, and to waive the Youth's rights and my rights as legal guardian and the rights of any other person entitled to act on behalf of the Youth, and to discharge all persons and entities mentioned in this release, from all claims for damages for death, personal injury, or property damage that the Youth may have, or which may hereafter accrue to the Youth, as a result of his/her participation in this Event, even though that liability may arise from negligence, carelessness, or recklessness (whether simple or gross) on the part of the persons or entities being released, from damages or defective property or equipment owned, maintained or controlled by them or because of their possible liability without fault. I understand and agree that this Waiver and Release is



binding on my heirs, assigns and legal representatives and the heirs, assigns and legal representatives of the Youth.

I attest that the Youth is physically capable of, and understand that the Youth should have trained for, completing this Event. I am not aware of any physical infirmity, ailment or illness that would interfere with the Youth's participation in this event nor is the Youth under treatment for any condition that may interfere with the Youth's participation in this event nor is the Youth under treatment for any condition that may interfere with his/her participation. Alternatively, where there is a condition that may affect the Youth's participation in this event, the Youth's medical care provider has been apprised of and has approved of the Youth's participation in this event. I acknowledge that the Youth and the Youth's adult companion are responsible for the Youth's personal health and safety during the event, and the personal property the Youth brings to the Event. I consent on behalf of the Youth to allow the Youth to receive all medical treatment which may be advisable in the event of illness or injuries suffered by the Youth during the Event, and I agree to pay for the costs of any such medical treatment.

I agree that the Youth's participation in the Event is subject to the sole discretion of the organizers of this Event, and that participation may be limited or terminated, with or without cause.

Signature of Legal Guardian	
Date:	