



2009 Grand & Toy Corporate and Team Relay Challenge Entry Form

Relay Teams will have five (5) or fewer members. There are five relay legs of approximately 8 K each

COMPANY / TEAM NAME: (Please Print) _____

(What is written on the above line will appear of the bib of each team member)

Team Captain/Contact	
Last Name: _____	First Name: _____ Male <input type="checkbox"/> Female <input type="checkbox"/>
Address: _____	City _____ PC _____
Tel: _____ Off. Tel: _____	Email _____ I agree to waiver (please check): <input type="checkbox"/>
SIGNATURE: _____	Parent/Legal Guardian Signature if under 18 yrs _____

Team Member #2	
Last Name: _____	First Name: _____ Male <input type="checkbox"/> Female <input type="checkbox"/>
Address: _____	City _____ PC _____
Tel: _____ Off. Tel: _____	Email _____ I agree to waiver (please check): <input type="checkbox"/>
SIGNATURE: _____	Parent/Legal Guardian Signature if under 18 yrs _____

Team Member #3	
Last Name: _____	First Name: _____ Male <input type="checkbox"/> Female <input type="checkbox"/>
Address: _____	City _____ PC _____
Tel: _____ Off. Tel: _____	Email _____ I agree to waiver (please check): <input type="checkbox"/>
SIGNATURE: _____	Parent/Legal Guardian Signature if under 18 yrs _____

Team Member #4	
Last Name: _____	First Name: _____ Male <input type="checkbox"/> Female <input type="checkbox"/>
Address: _____	City _____ PC _____
Tel: _____ Off. Tel: _____	Email _____ I agree to waiver (please check): <input type="checkbox"/>
SIGNATURE: _____	Parent/Legal Guardian Signature if under 18 yrs _____

Team Member #5	
Last Name: _____	First Name: _____ Male <input type="checkbox"/> Female <input type="checkbox"/>
Address: _____	City _____ PC _____
Tel: _____ Off. Tel: _____	Email _____ I agree to waiver (please check): <input type="checkbox"/>
SIGNATURE: _____	Parent/Legal Guardian Signature if under 18 yrs _____

COST: by Oct 29 \$275 by Feb 4 \$300 by Apr 1 \$350 by May 6 \$500
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, and any or all of the following events: the Canon Marathon, the Half Marathon, the Relay Challenge, the 10K, the 5K, the 2K, Post Race Activities on Saturday May 9th and Sunday May 10th 2009 and any other 2009 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, the Ontario Roadrunners Association, the Ontario Track & Field Association, 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. 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.

For more information or to register and take part in this team building event, please contact:
Mississauga Marathon 905-949-2931 Fax. 905-949-4984 info@mississaugamarathon.com
Mail completed form and cheque (payable to Mississauga Marathon) to: Mississauga Marathon-Landmark Sport Group, 1 City Centre Dr, Suite 605, Mississauga, ON L5B 1M2

OFFICE ONLY: Payment Received _____
