



# Vancouver Sowers Society of Education

## 溫哥華苗圃行動教育協會

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Website: [www.vansowers.org](http://www.vansowers.org)

Charity Registration Number: 85995 6286 RR0001

### Challenge 12 Hours, 挑戰十二小時 2017 – Registration & Waiver Form

**Event Date and Time:** Please select the groups you wish to join. Application cut off is July 15.

- Group C, Leisure 休閒組, Bus Tour:**  
Fort Langley, Honey Farm, Goji Farm, July 29, 2017 (Saturday)
- Group B, Advanced 健步組: Mt. Strachan August 05, 2017 (Saturday)**
- Group A, Challenge 挑戰組: Cypress Mountains August 05, 2017 (Saturday)**

Thank you for joining the VSSE 2017 Challenge 12 Hours Fund Raising Hike/Walk. To participate, please:

1. complete this registration form & return to VSSE or email to: [vsse\\_member@vansowers.org](mailto:vsse_member@vansowers.org) ;
2. read Liability and Waiver Statements below to fully understand the nature and potential hazards involved in the event; sign where indicated to accept the terms and conditions set forth therein. Applicants under 19 years of age must have written consent of parent/guardian;
3. You will be contacted via e-mail by VSSE for more information about the event and can start to fund raise by downloading the pledge form from the VSSE web site;

#### Registrant Details:

**Name:** \_\_\_\_\_ **email:** \_\_\_\_\_ **Gender:** \_\_\_M\_\_\_F  
*Last, first, initials*

**Age Group:** \_\_\_ 12-19 yrs. \_\_\_ 20-29 \_\_\_ 30-49 \_\_\_ 50-59 \_\_\_ 60+ **Tel:** \_\_\_\_\_

**Emergency Contact Person:** Name \_\_\_\_\_ **Tel:** \_\_\_\_\_

**Thank you for your participation and support in advancing the works of VSSE.**

#### Liability and Waiver Statements

I, \_\_\_\_\_ (please print name) hereby assume all of the risks of participating in and/or volunteering at this event. I further acknowledge and understand that participation in this hiking event carries with it inherent risks including, but not limited to, the risk of injury including death. It is the responsibility of each participant of this event to familiarize with the risks of running and including but not limited to other weather conditions, to weigh those risks against the advantages, and to decide whether or not to participate. The organizers of this event, the representatives, leaders, volunteers, email senders and members cannot and will not assume liability in respect of any of these risks, dangers, hazards and liabilities. Participants further acknowledge that it is their responsibility to ensure that they carry adequate medical, extended health, dental and accident insurance coverage, as well as protection for personal possessions. It is the participant's individual responsibility to verify that they are in good health and are physically capable of carrying out the outdoor activities. Therefore, in consideration of being allowed to participate, individuals release the VSSE Board of Directors, organizers, its representatives, leaders, email senders, volunteers and members of this fundraising event from all liability in respect of any personal injury suffered, any damage or loss of personal property, which may arise out of participation in this fundraising activity.

Signature of registrant: \_\_\_\_\_ Date: \_\_\_\_\_

If participant is under 19 years old, parent/guardian written consent is required:

I, as parent/guardian of above minor, have agreed to the terms of the Liability and Waiver Statements set forth above.

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_