



Upper Canada Mall Easter Seals 10k
Sunday, May 27, 2012 – Newmarket Riverwalk Commons

VOLUNTEER SIGN-UP FORM

Volunteer Information:

Please print clearly. *Denotes mandatory information

*Last Name		*First Name	*Age
*Address		*City/Province	*Postal Code
*Telephone Number	*Email Address (required for communication)		
*Have you volunteered at this event before? <input type="checkbox"/> Yes <input type="checkbox"/> No		Desired volunteer role (leave blank if no preference) <input type="checkbox"/> Course Marshal <input type="checkbox"/> Finish Line Crew <input type="checkbox"/> Water Station Crew <input type="checkbox"/> Timing Assistant <input type="checkbox"/> Set-up Crew <input type="checkbox"/> Event Greeter <input type="checkbox"/> Registration <input type="checkbox"/> Food tent crew <input type="checkbox"/> Bag Check	
Do you require a volunteer hours confirmation letter? <input type="checkbox"/> Yes <input type="checkbox"/> No		Special requests or comments	

WAIVER

I hereby agree that this activity is and shall be at my own risk and my child(ren)'s risk. In consideration for being permitted to participate in the Upper Canada Mall Easter Seals 10k, I, for myself and on behalf of my family, estate, beneficiaries, executors, administrators, and any person who may claim pursuant to the Family Law Act or through me, hereby forever release and save harmless Easter Seals Ontario, The Town of Newmarket, The Town of Aurora, The Regional Municipality of York, Upper Canada Mall Limited, Oxford Properties Group, The Ontario Track & Field Association, The Ontario Road Runners Association, Persechini Fitness & Squash Complex and their employees, members, volunteers, sponsors, participants and agents connected with this event from and against any and all action, claims for damages, costs and expenses that may arise out of my, or my child(ren)'s participation in this event, whether by their negligence or otherwise, including physical injury, death or damage to property. I hereby acknowledge that participating in this event can be hazardous and I certify that I am physically capable of participating in this event. Furthermore, I grant Easter Seals Ontario the irrevocable right to use in any way they see fit, for the purpose of publicizing and advertising, without restriction, my or my child(ren)'s name, face or voice. Easter Seals Ontario's privacy statement, terms and conditions can be accessed on our website at www.easterseals.org.

Signature: _____ **Date:** _____

A participant under the age of 18 must have this form signed by a parent or guardian. As a parent and/or legal guardian of the above named to participate in the Upper Canada Mall Easter Seals 10k on the basis of the conditions set forth in the above waiver.

Complete this form and e-mail, fax or mail to:

Upper Canada Mall Easter Seals 10k
One Concorde Gate, Suite 700
Toronto, Ontario M3C 3N6
E-mail: akrievins@easterseals.org
Fax: 416.696.1035