

# Big Game Blood Trackers Ontario (BGBTO)

*Seminar & Field Workshop July 18 & 19, 2015*

## Registration Form and Waiver

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

**Payment: by cheque -- payable to BGBTO; or INTERAC e-transfer to**

Laurel Whistance-Smith 42 Col. Williams Lane, Pontypool, ON L0A 1K0

[manverspack@nexicom.net](mailto:manverspack@nexicom.net)

705 277-9183

**Please sign Waiver below**

## WAIVER AND INDEMNITY

### PARTICIPATION AGREEMENT

I, \_\_\_\_\_, realize and hereby acknowledge that Laurel Whistance-Smith and Big Game Blood Trackers Ontario accept no responsibility whatsoever for the conduct or actions of persons or their dogs, who may be participating in events, or other factors beyond their control. Accordingly as a condition of the participation of myself, my dog and any other persons with whom I associate in the events, I hereby release Laurel Whistance-Smith and BGBTO from any or all claims, damages, or injuries which we may suffer or incur, whether directly or indirectly, including any liability for damages suffered by others as a result of any conduct or action of myself or my dog.

**THANK YOU FOR READING, FILLING OUT YOUR NAME IN THE BLANK SPACE ABOVE AND DATING AND SIGNING THIS FORM BELOW.**

DATE: \_\_\_\_\_

NAME (print): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_