**2017 ABORIGINAL HAVE A GO REGISTRATION FORM**

*Presented by:* BC WHEELCHAIR SPORTS ASSOCIATION

Britannia Community Centre (1661 Napier Street, Vancouver BC)

April 27th, 2017 – 3:00pm to 6:00pm

|  |  |  |
| --- | --- | --- |
| Name |  | **Male** 🔿 **Female** 🔿 |
| **Address** |  |
| **City/Province** |  | Postal |
| **Phone** | **Home:** | **Cell:**  |
| **Email** |  | **Date of Birth** |  |
| **Disability**  |  |

**Event Information:**

Thursday, April 27th, 2017 from 3:00pm – 6:00pm

Britannia Community Centre (1661 Napier Street, Vancouver BC V5L 4X4)

**Please send your registration form by email, mail or fax to:**

**Carrie Tse, BC Wheelchair Sports Association, 7**80 SW Marine Drive, Vancouver BC, V6P 5Y7

Email: programs@bcwheelchairsports.com Phone: 604-333-3520, ext. 209 Fax: (**604-326-1229)**

**Consent and Waiver**
**I, the participant, on behalf of myself, members of my family, my heirs, executors, administrators and assigns, hereby forever release, discharge and hold harmless BC Wheelchair Sport Association and all other associations and sponsoring companies and all other parties, including agents, other associations and sponsoring companies, connected with the 2017 Aboriginal Have a Go at Wheelchair Sports** **for any injury, loss or damage to my person or property howsoever caused, arising out of or in connection with my taking part in the 2017 Aboriginal Have a Go at Wheelchair Sports** **and activities and notwithstanding that the same may have been contributed to or occasioned by the activities of BC Wheelchair Sports Association and all other parties, including agents, servants and volunteers of BC Wheelchair Sports Association, other associations, and sponsoring companies. I also give full permission for use of my name, image and/or photograph in connection with this event. \* We respect your privacy, and will not sell or share your personal information with any other party or organization without your consent.**

Signature Parent/Guardian Signature Date

(if under the age of 19 yrs)