



Bolton Pole Vault

2025/26 Program Registration

Athlete's Information:

Name:		
Address:		
City/ Town:	Province:	Postal Code:
Home Phone:	Cell Phone:	
Email Address:		
Date of Birth (MM/DD/YY):	Gender (M/F):	

Parent's Information:

Name:	
Email Address:	
Home Phone:	Cell Phone:

Programs

Full year \$1300
September 30, 2024 to August 13, 2025

Indoor Season \$700
September 30, 2024, to March 15, 2025

Outdoor Season \$600
March 16, 2024, to August 13, 2025

High School Season \$300
March 15, 2025, to June 7, 2025

Daily Training Fee \$30

* Athletics Ontario registration fee to be paid directly by athlete.

Waiver

In consideration of the acceptance of my entry in any Bolton Pole Vault program, I freely and without duress, HEREBY FOREVER RELEASE, WAIVE, DISCHARGE, INDEMNIFY and hold harmless Bolton Pole Vault, the Town of Caledon, the Region of Peel, the Peel District School Board, Doug Wood, Jason Wurster, Ian Anderson, and Zdenek Kryorka and their respective directors, officers, employees, volunteers, coaches and any of their successors and assigns (the "Releases"), 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 person or property however caused (including without limitation by the negligence of omissions of the Releases), arising out of or in any way connected to my participation in the said program. I ACKNOWLEDGE that participation in the said program has inherent risks and I WARRANT that I am physically fit to participate in it. I ACKNOWLEDGE that my image may be filmed or photographed during the program and I AGREE to the use of my name, age and my image in any form in broadcasts, newspapers, brochures, promotional material and other media without compensation. I consent to the use of my personal information contained in this registration form for the purpose of soliciting my participation in future programs or events. I AGREE that this Waiver is intended to be as broad and inclusive as permitted by the laws of Ontario and that it shall be governed and interpreted according to the laws of Ontario and that if any portion of this Waiver is held invalid by any Court of competent jurisdiction, the invalidity of such portion shall not otherwise affect its remaining provisions which shall continue in full legal force and effect. I CONFIRM that I have read and understood this Waiver prior to signing and agree that it will be binding on my heirs, executors, administrators, successors and assigns. I CONFIRM that I am 18 years of age and the legal parent or guardian of the registrant if agreeing to this waiver on behalf of a minor.

Parent and/or Guardian to sign if Athlete is under 18 years of age.

Signature: _____

Name of Signatory (please print): _____

Date (MM/DD/YY): _____