



**EVENT ENTRY, RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMINITY, AND PARENTAL CONSENT
AGREEMENT AND WAIVER**

In consideration of participating in the "2026 Special Olympic N.W.T. / LETR Polar Plunge", (the "Event"), I represent that I understand the nature of water plunge events and that I and/or my minor child (minimum age 16 years) are competent, qualified, in good health, and in proper physical condition to participate in the Event. I acknowledge that if I and/or my minor child believe the conditions are unsafe, I and/or my minor child will immediately discontinue participation in the Event and any related activities. I fully understand that the Event involves risk of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, negligence of the "Releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time, and I fully accept and assume all such risks and all responsibility for any losses, costs, and damages I and/or my minor child incur as a result of my or my minor child's participation in the Event and any related activities. I will be present to register, sign waiver and during the plunge while my minor child participates.

I hereby release, discharge, and covenant not to sue the Law Enforcement Torch run Northwest Territories, Special Olympics Northwest Territories, the Department of Industry, Tourism and Investment, Government of the Northwest Territories, their respective administrators, directors, agents, officers, volunteers and employees, other participants, any sponsors, advertisers and if applicable, owners, and lessors of premises on which the Event takes place, (each considered one of the "RELEASEES" herein) from all liabilities, claims, demands, losses or damages on my and/or my minor child's behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost which may incur as the result of such claim. In addition, I hereby authorize any of the Releasees and/or their agents to photograph, film, tape, or otherwise create audio and/or video recordings, still images, and/or textual descriptions of me and/or my minor child, and to use the same for any legitimate purpose, as well as to use the name and biographical information of me and/or my minor child in connection therewith, without compensation or further permission.

I am at least 19 years of age or older, and have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY, AND PARENTAL CONSENT AGREEMENT. I understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance and intend to be an unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this Agreement is held to be invalid, the balance notwithstanding shall continue in full force and effect. This document shall be binding upon me and my minor child, including my and/or my minor child's heirs, executors, administrators and assigns, and any legal guardian of my minor child.

Printed Full Name of Participant	Phone
Address	Email Address
Date	Signature of Participant
Printed Full Name of Minor Participant if Between 16 and 19 years.	Printed Full Name of Parent/Guardian
Date	Signature of Parent/Guardian
For more information email: executivedirector@sonwt.ca	