## **SEVEN SUMMITS**

## BIKE AND HIKE CHALLENGE OFFICIAL WAIVER AND ENTRY FORM

Box 206, Wells, BC VOK 2RO 1-86

1-866-994-2345

FAX your entry form immediately to: 250-994-2345(but call first)

email to: 7summitschallenge@gmail.com

Payment (\$40) will be accepted up to race registration at 7 am\_\_\_\_\_ but you must register for the race by Thursday Sept 15th

NAME:				
Address:				
POSTAL CODE	•			
EMAIL ADDRES	ss(PLEAS	E PRINT CAREFU	LLY AND LEGIBLY):	
GENDER		DATE OF BIRT	 Н	
EMERGENCY (	CONTACT:	·		_
ALLERGIES?(P	ENICILLIN	, FOOD, ETC):		
MEDICAL CON	DITIONS			
guarantee that I'm conditioning will n with it certain risks least of which is the appropriate precaut order, and I trust m course of this even benefactors, sponso aren't insured and a	here in at least "go ot get a perso inherent to tre e possibility trions. My hel y life and saf t. Me and my ors, volunteer ain't worth a	eby acknowledge that bod" physical condition through this event. The ravel and or competition that I might get lost or limet, bicycle, shoes are fety to them. I take fury estate waive all legals, and any others invo	I'm signing up for a world on, recognizing that 'poor' I fully acknowledge that the on in a remote wilderness e eaten by a bear. As such, and other equipment are in gell responsibility for myself I right to file suit with the eleved with the event. Heck on't litter, but I will have the oregin of the suit will have the oregin of the suit will have the su	to 'fair' nis event carries setting, not the I have taken all good working during the event promoter, , most of them
Signature:		W	itness:	