

SEPTEMBER 30, 2023

DOWNSVIEW PARK, TORONTO

2023 REGISTRATION FORM

ONE PERSON PER REGISTRATION FORM. PLEASE PRINT CLEARLY AND COMPLETE BOTH SIDES OF THE FORM.

PARTICIPANT TYPES	Team Name	Company Name					
WHAT	WHO	REGISTRATION	FUNDRAISING	[1] Youth participants must be accompanied by a registered adult who has met their fundraising minimum to gain entry to live event [2] Jr. Volunteer Crew who are 14-15 years of age must			
LIVE EVENT	○ Adult (18+)	\$25	\$250 (minimum to attend live event)				
LIVE EVENT	O Youth (0-17)	\$0 ^[1]	\$100 (suggested goal to attend live event)	be accompanied by a registered adult, and those who are 16-17 years of age must have a waiver signed by a			
VIRTUAL EVENT	O Adults (18+)	\$0*	\$250 (suggested goal)	legal guardian * Adults who choose to participate in the virtual event,			
	O Youth (0-17)	\$0	\$100 (suggested goal)	but later decide they'd like to attend the live event can do so by paying the \$25 registration fee and reaching			
VALUNTEED ADEV	O Adult Volunteer Crew (18+)	\$0	\$100 (suggested goal)	the \$250 fundraising minimum NOTE: T-shirts are provided to participants and			
VOLUNTEER CREW	O Jr. Volunteer Crew (14-17)	\$0[2]	\$100 (suggested goal)	volunteers of the live, in-person event only.			
REGISTRATION INFO	RMATION (Make cheques payable to	SickKids Foundation)					
1. First Name	Last Nam						
Age on Event Day 0-13 014-17 018			a SickKids kid? Y N T-shirt size: Adult S M				
Adult Live Event	Youth Live Event Adult Virtual E	vent Youth Virtual Ev		Volunteer Crew			
Email			Phone #				
TEAMMATES							
2. First Name	Last Nam	е					
Age on Event Day 00-13 014-17 018	3-29 ○30-44 ○45-59 ○60-74 ○75+	Are you	a SickKids kid? Y N T-shirt size: Adult S M	L XL XXL T-shirt size: Youth XS S M L			
Adult Live Event	Youth Live Event Adult Virtual E	vent Youth Virtual Ev	ent Adult Volunteer Crew Jr.	Volunteer Crew			
Email			Phone #				
3. First Name	Last Nam	е					
Age on Event Day 00-13 014-17 018	3-29 ○30-44 ○45-59 ○60-74 ○75+	Are you	a SickKids kid? Y N T-shirt size: Adult S M	L XL XXL T-shirt size: Youth XS S M L			
Adult Live Event	Youth Live Event Adult Virtual E	vent Youth Virtual Ev	ent Adult Volunteer Crew Jr.	Volunteer Crew			
Email			Phone #				
4. First Name	Last Nam	е					
Age on Event Day 0-13 014-17 018	3-29 ○30-44 ○45-59 ○60-74 ○75+	Are you	a SickKids kid? Y N T-shirt size: Adult S M	T-shirt size: Youth XS S M L			
Adult Live Event	Youth Live Event Adult Virtual E	vent Youth Virtual Ev	ent Adult Volunteer Crew Jr.	Volunteer Crew			
Email			Phone #				
5. First Name	Last Nam	е					
Age on Event Day 0-13 014-17 018	3-29	Are you	a SickKids kid? Y N T-shirt size: Adult S M	L XL XXL T-shirt size: Youth XS S M L			
Adult Live Event	Youth Live Event Adult Virtual E	vent Youth Virtual Ev	ent Adult Volunteer Crew Jr.	Volunteer Crew			
Email			Phone #				
HOME ADDRESS							
	ress		City	Province Postal Code			

REGISTRATION PAYMENT Please submit your non-refundable, non-transferable registration fee (prices listed above) with this form. If you are submitting by cheque, please make payable to SickKids Foundation. Please do not send cash. Expiry Date ____MM___ / __ Please charge \$ _ to my: Card Number _ Master Card Cardholder Name _ Join us by making the first donation. Not only does this provide your fundraising campaign momentum, it also sets the bar for any following donations - so set your targets high to raise those all-important funds for SickKids! In addition to my registration fee, please charge a \$ donation amount to kick-off my fundraising campaign. WAIVER RELEASE AND INDEMNITY SickKids GetLoud I, on behalf of myself and if applicable, the minor or minors listed below for whom I am a parent or legal I on behalf of myself or the Minor(s) (if any) agree that my, the Minor(s) (if any) and/or the Dog(s) (if any) guardian (the "Minor(s)"), wish to participate in SickKids GetLoud benefiting The Hospital For Sick Children participation in the Event is subject to the sole discretion of the organizers of the Event, and that my and/or the Foundation, scheduled to take place virtually throughout September 2023, and may participate in the Minor(s) (if any) participation may be limited or terminated, with or without cause. in-person event to be held on September 30, 2023, as well as in various pre and post event activities (collectively, the "Event"). I on behalf of myself and the Minor(s) (if any) agree to conduct myself in a safe I on behalf of myself and the Minor(s) (if any) for whom I am a parent or legal guardian understand that any manner and abide by all rules, regulations, and event instructions of the Event, as well as all applicable

I and the Minor(s) (if any) understand that participating in the Event involves using public streets and facilities, and the use of and participation in the Event is a potentially hazardous activity and can result in serious personal injury or death. I and the Minor(s) (if any) further acknowledge and agree that attending the any in-person portions of the Event may increase our risk of being exposed to or infected by COVID-19, and COVID-19 may result in personal injury, illness, hospitalization, permanent disability, and death. I on behalf of myself and the Minor(s) (if any) am aware of and expressly assume all risks associated with participating in this Event, and I assert that my participation or the participation of the Minor(s) (if any) in this Event is

municipal, provincial and federal laws and regulations, including without limitation any and all public health

guidelines and measures put in place by the Event organizers or any public health authority regarding the

prevention and mitigation of spreading infectious diseases such as COVID-19.

If I bring a dog(s) (the "Dog") to the Event, I accept that I am solely and fully responsible for any bodily injury or property damage as a result of the Dog(s)'s actions at the Event. I represent and warrant that the Dog(s) is healthy, up to date on vaccinations and not aggressive in nature. I agree to keep the Dog(s) on a leash at all times and agree to remove the Dog(s) from the Event if requested by Event staff.

In consideration for being permitted to participate in this Event, I, on behalf of myself and the Minor(s) (if any), hereby waive, release and forever discharge, from any and all claims for injuries, damages and losses I and the Minor(s) (if any) may have arising out of the Event or my and the Minor(s) (if any) participation in the Event against The Hospital for Sick Children Foundation, The Hospital For Sick Children, any beneficiaries, sponsors, other Event participants, consultants, participants, third-party vendors, government or public entities, and each of their respective affiliates, successors, officers, directors, members, employees, volunteers, agents, and representatives, (collectively referred to as the "Releasees"), of and from any and all proceedings, claims, demands, damages, costs, expenses, actions and causes of action (whether known or unknown) whatsoever, both in law and in equity, which I and the Minor(s) (if any) now have or may hereafter have for or by reason of or in respect of my and the Minor(s) (if any) participation in the Event whether as a spectator, participant, competitor or otherwise, and notwithstanding that same may have been contributed to, or occasioned by, the negligence of any of the Releasees.

I further hereby agree to indemnify all of the Releasees from and against any and all liability incurred by any or all of them as a result of, or in any way connected with, my participation, the Minor(s) (if any) and/or the Dog(s) (if any) participation in the Event.

I on behalf of myself and the Minor(s) (if any) for whom I am a parent or legal guardian understand that any donations to The Hospital For Sick Children Foundation are non-refundable and non-transferable, even if I or the Minor(s) (if any) do not participate in the Event. I further understand that my registration fee is non-refundable, non-transferable, does not apply toward my fundraising commitment, and is not tax deductible.

If I have registered as an Adult for the live portion of the Event to take place on September 30, 2023 (the "Live Event"), I understand that I must raise at least \$250 (the "Minimum Fundraising Amount") in support of SickKids Foundation in order to participate in the Live Event. If I am not able to fundraise the Minimum Fundraising Amount, I may make my own donation to reach that minimum in order to participate. Any Youth participants who register for the Live Event must be accompanied by an Adult who has validly registered for the Live Event and has met their Minimum Fundraising Amount of \$250.

I on behalf of myself or the Minor(s) (if any) give permission to The Hospital for Sick Children Foundation, The Hospital For Sick Children, and each of their respective affiliates, subsidiaries, agents, consultants and representative, for the free use of my, or the Minor's (if any) and/or the Dog(s) (if any) name, photograph, voice, likeness or statements, in any broadcast, website, telecast, advertising promotion, on social media or other use or reuse on account of this Event or marketing or promotion for future or similar events and I understand and consent that I will periodically be receiving communications related to my participation in the Event. I on behalf of myself or the Minor(s) (if any) agree that my or the Minor's (if any) name and amount fundraised can be provided to the Team Captain of the team to which I am registered.

The provisions of this Waiver, Release and Indemnity shall ensure to the benefit of the respective heirs, executors, administrators, personal representatives, successors and assigns of each of the Releasees and shall be binding upon my heirs executors, administrators and personal representatives and the heirs, executors, administrators and personal representatives of the Minor(s) (if any).

This Waiver, Release and Indemnity shall be interpreted and the rights of the parties determined, under the laws of the Province of Ontario and for Ontario courts shall have exclusive jurisdiction for any dispute. I have carefully read this Waiver, Release and Indemnity and fully understand and agree to its contents. By signing below, I acknowledge that the information provided is true and accurate, and that I have read, understand and give consent to the above.

Please print first and last name here						
Signature of participant (or guardian if participant is under 18)	Date	MM	/	DD	/	YY

An income tax receipt will be issued for gifts of \$20.00 or more. Please note that no tax receipt is provided for the registration fee. SickKids Foundation respects the privacy of its donors. We do not sell, rent, or trade our donor lists. The information we collect is used to process donations, keep our donors informed about the activities of the hospital and Foundation and ask for their support for our missions to improve children's health.

If at any time you wish to be excluded from future contacts, please call us at 416-813-7771.

PLEASE SEND YOUR COMPLETED FORM & REGISTRATION FEE (OR REGISTER ONLINE AT GETLOUDFORSICKKIDS.CA)

SickKids GetLoud c/o SickKids Foundation

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