



Team Alaska

Team Alaska Mailing Address:
1120 Huffman Road, STE-24-
318
Anchorage, AK 99515
(e) info@teamalaska.org
www.teamalaska.org

All documents must be post-marked by January 25, 2020:

Team Alaska
1120 Huffman Road
STE 24-318
Anchorage, AK 99515

Please direct any questions to
Shawn Maltby ,Chef de Mission
shawn@teamalaska.org

PERSONAL INFORMATION

Full Name:			
	Last	First	M.I.
Address:			
P.O Box #			
City		State	Postal Code
Home Phone:	()	Alternate Phone:	()
Birth Date:		Gender	
Parent/legal guardian name:		Employer:	
Allergies/Conditions:			
Medication/Emergency Treatment:			
Health Care #:	Health Care Expiry:		
Passport #:	Passport Expiry:		

CONSENT FOR USE OF PERSONAL INFORMATION AND PHOTO RELEASE

1. I, the participant, authorize Arctic Winter Games Team Alaska (collectively the "Organization") to collect and use personal information about me for communication purposes within AWGTA and the State of Alaska.
2. Furthermore, I grant permission to the Organization to photograph and/or record my image and/or voice on still or motion picture film and/or audio tape, and to use this material to promote sport, recreation and physical activity through the media of newsletters, websites, television, film, radio, print and/or display form. I understand that I waive any claim to remuneration for use of audio/visual materials used for these purposes.

We do not sell or distribute your personal information to any other third party not listed herein.

Name of Participant _____
Date

Signature of Participant or Parent/Legal Guardian Signature if under 19

ACCEPTANCE OF TERMS AND CONDITIONS

In consideration of the acceptance of my membership in the Organization, I agree as follows:

1. To abide by the policies (specifically Arctic Winter Games Team Alaska Code of Conduct), rules and regulations of the Organization.
2. I accept sole responsibility for my personal possessions and athletic equipment.
3. The participant authorizes AWGTA to do a criminal background check at the organization's sole discretion, of whatever nature AWGTA deems appropriate, and that AWGTA has full discretion to deny participation based on the outcome of any such check.

I acknowledge that I have read this registration agreement in its entirety and that I have executed this registration agreement voluntarily.

By signing your name and dating below, you agree that you are to be bound by all that is contained in this Registration Form.

Signature of Participant _____
Date

Signature of Parent/Legal Guardian if under 19 _____
Date

INFORMED CONSENT AND ASSUMPTION OF RISK AGREEMENT
(for those under the age of 19)

By signing this document you will waive certain legal rights, including the right to sue in circumstances outlined in this Agreement. Please read carefully.

Participant's Name: _____ Date: _____

This is a binding legal agreement; therefore clarify any questions or concerns **before** signing. As a Participant of Arctic Winter Games Team Alaska (henceforth known as AWGTA) events, programs, competitions, travel, and activities organized, operated or conducted and/or sanctioned by AWGTA (collectively the "Events"), the undersigned, being the Participant and the Parent/Guardian of the Participant (collectively the "Parties") acknowledges and agrees to the following terms:

Disclaimer

AWGTA and its directors, officers, mission staff, committee members, members, employees, volunteers, participants, agents and representatives (collectively the "Organization") are not responsible for any injury, personal injury, damage, property damage, expense, loss of income or loss of any kind suffered by a Participant during, or as a result of, the sport and any Events, caused by the risks, dangers and hazards associated with participating with AWGTA.

Description of Risks

The Participant is participating voluntarily in their sport or any Events of the Organization. In consideration of my participation, the Parties hereby acknowledge that they are aware of the risks, dangers and hazards and may be exposed to such risks, dangers and hazards. The risks, dangers and hazards include, but are not limited to, injuries from:

- a) Sport
- b) Vigorous physical exertion, strenuous cardiovascular workouts and rapid movements;
- c) Failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment;
- d) Contact, colliding, falling or being struck by other participants or equipment;
- e) Spinal cord injuries which may render me permanently paralyzed;
- f) Travel to and from Events that are an integral part of the Organization's Events.

Furthermore, I am aware:

- a) That injuries sustained can be severe;
- b) That I may experience anxiety while challenging myself during the activities, events and programs;
- c) That I may come into close contact with other participants;
- d) That my risk of injury is reduced if I follow all rules established for participation; and

Release of Liability

In consideration of the Organization allowing the Participant to participate, the Parties agree:

- a) To freely accept and fully assume all such risks, dangers and hazards and possibility of personal injury, death, property damage, expense and related loss, including loss of income, resulting from sport or any Events;
- b) To forever release the Organization from any and all liability for any and all claims, demands, actions and costs that might arise out of the Participant's participation in competition or any Events, or from any breach of contract.

Acknowledgement

The Parties acknowledge that they have read this agreement and understand it, that they have executed this agreement voluntarily, and that this Agreement is to be binding upon themselves, their heirs, executors, administrators and representatives.

Printed Name of Participant

Signature of Participant

Date of Birth

Printed Name of Parent or Guardian

Signature of Parent or Guardian

Date

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT
(FOR THOSE 19 YEARS OF AGE AND OLDER)

By signing this document you will waive certain legal rights, including the right to sue. Please read carefully.

This is a binding legal agreement; therefore clarify any questions or concerns before signing. As a Participant of AWGTA and/or the events, programs, competitions, travel, and activities organized, operated or conducted and/or sanctioned by AWGTA (collectively the "Events"), the undersigned acknowledges and agrees to the following terms:

Disclaimer

Arctic Winter Games Team Alaska and its directors, officers, committee members, members, employees, volunteers, participants, agents and representatives (collectively the "Organization") are not responsible for any injury, personal injury, damage, property damage, expense, loss of income or loss of any kind suffered by a Participant during, or as a result of, the Events, caused in any manner whatsoever including, but not limited to, the negligence of the Organization.

Y I have read and agree to be bound by paragraphs 1 and 2.

Description of Risks

I am participating voluntarily in AWGTA's Program and the Events. In consideration of my participation, I hereby acknowledge that I am aware of the risks, dangers and hazards associated with or related to the Events. The risks, dangers and hazards include, but are not limited to, injuries from:

- a) Exerting and stretching various muscle groups;
- b) Failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment;
- c) Contact, colliding, falling or being struck by other participants or equipment;
- d) Spinal cord injuries which may render me permanently paralyzed;
- e) Travel to and from Events that are an integral part of the Organization's Events.

Furthermore, I am aware:

- e) That injuries sustained can be severe;
- f) That I may experience anxiety while challenging myself during the activities, events and programs;
- g) That I may come into close contact with other participants;
- h) That my risk of injury is reduced if I follow all rules established for participation; and

Release of Liability and Disclaimer

In consideration of the Organization allowing me to participate, I agree:

- c) To freely ACCEPT AND FULLY ASSUME all such risks and possibility of personal injury, death, property damage, expense and related loss, including loss of income, resulting from my participation in the activities, events and programs of the Organization; and
- d) To FOREVER RELEASE the Organization from any and all liability for any and all claims, demands, actions, damages (including direct, indirect, special and/or consequential), losses, actions, judgments, and costs (including legal fees) (collectively, the "Claims") which I may have or may in the future, that might arise out of, result from, or relate to my participation in the Major Games program my presence at any venue, the Events, activities or programs of the Organization, and/or my traveling to or from the Events, activities or programs of the Organization, even though such Claims may have been caused by any manner whatsoever, including but not limited to, the negligence, gross negligence, negligent rescue, omissions, carelessness, breach of contract and/or breach of any statutory duty of care of the Organization.

Y I have read and agree to be bound by paragraphs 3-5.

Acknowledgement

I acknowledge that I have read and understand this agreement, that I have executed this agreement voluntarily, and that this agreement is to be binding upon myself, my heirs, spouse, children, parents, guardians, next of kin, executors, administrators and legal or personal representatives.

Name of Participant (Please Print)

Signature of Participant

Date

NOTORIZED Travel Consent Form for Minors Travelling Abroad

To whom it may concern,

I / We,

full name(s) of parent(s) / person(s) / organization giving consent

Address:

street address, city

state, country

Telephone and email:

Telephone

Email

I am / are the parent(s), legal guardian(s) or other authorized person(s) or organization with custody rights, access rights or parental authority over the following child:

Information about travelling child

Name:

child's full name

Date and place of birth:

dd/mm/yyyy

city, province/territory

Number and date of issue of passport:

Number

dd/mm/yyyy

Issuing authority of passport:

country where passport was issued

Birth certificate registration

Number

Issuing authority of birth

province / territory where birth certificate was issued

Consent

I / We give our consent for this child to travel with Arctic Winter Games Team Alaska to participate in the 2016 Arctic Winter Games

Destination(s):

Whitehorse, Yukon Territory

Travel dates:

March 14, 2020 – March 21, 2020

Date of departure to date of return

Printed Name of Parent or Guardian

Signature of Parent or Guardian

Date

SIGNATURE OF OFFICIAL NOTARY:

This document was signed before me on this _____ day of _____ (month) _____ (year)

By _____ (name of person giving consent)

Signature of official

Name / title of official



2020 Arctic Winter Games (the "Games") PARTICIPANT AGREEMENT

BETWEEN: Whitehorse 2020 Arctic Winter Games and Arctic Winter Games International Committee (collectively, the “Released Parties”)

AND: _____ (the “Participant”)

PRINT Participant First and Last Name

Consent for Treatment

Consent for Treatment. I, and/or on behalf of my minor child/ward (as applicable) authorize and consent to any physician, therapist, dentist, chiropractor, nurse and/or any other health care professional (the "**Medical Personnel**") to perform any procedure, treatment or prevention (the "**Procedures**") deemed to be necessary or prudent by the Medical Personnel, in his/her absolute and sole discretion, for my and/or my child/ward's (as applicable) health, safety and well-being during the Games or such reasonable time related thereto. The anticipated nature, effects, alternatives to and possible complications of the Procedures will be explained in advance by the Medical Personnel prior to performing the Procedures where reasonably possible. In the event of a life threatening emergency, which shall be determined in the sole and absolute discretion of the Medical Personnel, I authorize and/or authorize on behalf of my minor child/ward (as applicable) the recommended Procedure without being provided an explanation.

I, and/or on behalf of my minor child/ward (as applicable) acknowledge that the Medical Personnel, the Released Parties and their directors, officers, employees, and agents assume no responsibility or liability for the failure, ongoing efficacy or effect of any of the Procedures provided. I, and/or on behalf of my minor child/ward (as applicable), voluntarily assume all risk of injury and all other losses and damages that may be sustained, incurred, or suffered, arising out of or occurring directly or indirectly by reason of the Procedures. I, and/or on behalf of my minor child/ward (as applicable), hereby release the Medical Personnel and the Released Parties from all liability for any loss, damage, expense, injury or other claim whatsoever in any way connected with the Procedures, including those caused by the Medical Personnel's negligence or breach of contract. I, and/or on behalf of my minor child/ward (as applicable), further agree that I, and/or on behalf of my minor child/ward (as applicable), will be responsible to pay any and all costs that may arise from the Procedures and the costs of all further medical treatments, procedures, consultations, care, services or medications provided to me and/or my minor child/ward (as applicable), including any measure taken to adjust, modify, or reverse a Procedure performed by the Medical Personnel.

I, and/or on behalf of my minor child/ward (as applicable), acknowledge that it is my (or my own and/or my minor child/ward, as applicable) responsibility to obtain any required insurance (including but not limited to health care, property or personal effects insurance, accidental death, disability or dismemberment or medical expense insurance) for and on behalf of myself (or/or on behalf of my minor child/ward, as applicable).

I, and/or on behalf of my minor child/ward (as applicable), hereby further consent to the collection, use and disclosure of personal information and/or personal health information relating to me and/or my minor child/ward (as applicable) by the Medical Personnel to my and/or my minor child/ward's (as applicable) family doctor, Public Health and to other health and medical professionals, and/or by my and/or my minor child/ward's (as applicable) family doctor, Public Health and other health and medical professionals to the Medical Personnel, for the purpose of the providing and facilitating treatment, and for ensuring continuity of care, in the event of injury to myself and/or my minor child/ward (as applicable) or other medical emergency, in accordance with the *Health Information Act* (Yukon), and any other applicable privacy legislation. Such consent shall only apply with respect to an injury or other medical emergency or existing condition requiring treatment during the Games or such reasonable time related thereto and I am aware that I may withdraw or withhold my consent at any time.



Consent to Use of Information

For valuable consideration received, including the opportunity for me (or my minor child/ward, as applicable) to participate in the Games, I hereby irrevocably and perpetually grant to the Released Parties together with their committee members, directors, officers, employees, volunteers, agents, advisors, contractors, lessees and representatives (collectively, the "**Arctic Winter Games Parties**"), the right to:

- (a) capture my (or my minor child/ward's, as applicable) image, likeness, and/or voice in photographic, video or any other format (the foregoing, collectively, the "**Recordings**"); and
- (b) reproduce, copy, use, store, modify, exhibit, display, broadcast, distribute, transmit, create derivative works from, and/or publish the Recordings or any portion thereof, including in connection with my (or my minor child/ward's, as applicable) name, and whether alone or in combination with other materials, in any media now known or later developed (including without limitation print, film, internet and other electronic media), for any purpose whatsoever;

all without further compensation, consideration, or notice or permission to me (or myself and my minor child/ward, as applicable), in connection with or incidental to the Games and in connection with other activities advertising, promoting, or publicizing the Arctic Winter Games, the Games, or related business or activities.

The Arctic Parties or their designee shall have complete ownership of the Recordings, including copyright therein. I hereby waive any and all moral rights, and rights of compensation or ownership, that I (or myself and my minor child/ward, as applicable) may have in or with respect to the Recordings, and waive any right that I (or myself and my minor child/ward, as applicable) may have to inspect or approve any finished image or video or any use of the Recordings by or on behalf of the Arctic Winter Games. I acknowledge that the Recordings may be provided to media outlets for their unrestricted use, and that the Arctic Winter Games do not have control of this material once it is disseminated.

I, and/or my own and my minor child/ward's (as applicable), heirs, executors, administrators, successors, and assigns, hereby release, remise and forever discharge and agree to hold harmless the Arctic Winter Games each of their respective heirs, executors, administrators, successors, and assigns, from and against any and all manner of liability for any claims, actions, causes of action, suits, costs, demands and expenses, losses and liabilities of any nature whatsoever and kind that I (or myself and my minor child/ward, as applicable) may now or hereafter be entitled to assert, including but not limited to any claims based on publicity rights, privacy rights, personality rights, "moral rights", or defamation, that I (or myself and my minor child/ward, as applicable) may sustain, incur, suffer, be put to, or whether caused by, contributed to, arising out of, or otherwise related to the Arctic Winter Games' use of the Recordings, whether or not caused by negligence.

RELEASE, WAIVER AND ASSUMPTION OF RISK

Assumption of Risk:

By signing below, I acknowledge and understand on behalf of myself and/or my minor child/ward (as applicable), that participating in the Games and/or the use of the equipment, facilities, and premises for the Games may result in accident, loss, damage, injury, or death to myself (or my minor child/ward, as applicable) and theft, damage or loss of personal property. Accident, loss, damage, injury or death may result from any activity conducted in the Games and/or the use of the equipment, facilities, and premises for the Games. Risks of participating in the Games and/or of using the equipment, facilities, and premises for the Games include, but are not limited to: allergic reactions, elevated heart rate, elevated blood pressure, slips and falls, drowning, physical injuries including musculoskeletal injuries, broken bones, severe injuries to the head, neck, and back, or other bodily injuries that may result in permanent disability or death.

I, and/or on behalf of my minor child/ward (as applicable), hereby declare that I am (or my minor child/ward is, as applicable) physically sound and suffering from no condition, impairment, disease, infirmity or other illness that would preclude my (or my minor child/ward's, as applicable) participation in the Games and/or the use of the equipment, facilities, and premises for the Games. I, and/or on behalf of my minor child/ward (as applicable), acknowledged that I (or my minor child/ward, as applicable) have received medical attention, or have had the opportunity to receive such medical attention, to ensure that I am (or my minor child/ward is, as applicable) physically capable and able to participate in the Games and/or use the equipment, facilities, and premises for the Games.

I, and/or on behalf of my minor child/ward (as applicable), freely and voluntarily assume all risks of loss, damage, injury or death to my (and/or my child/ward's, as applicable) person and property that may be sustained in connection with the Games and/or the use the equipment, facilities, and premises for the Games.



Rules:

I, and/or on behalf of my minor child/ward (as applicable), understand that the rules and regulations are designed for the safety and protection of participants and hereby agree to abide by the rules and regulations set down by the Released Parties and that at all times the sole responsibility of personal safety is my (and/or my child/ward's, as applicable) responsibility.

I, and/or on behalf of my minor child/ward (as applicable), agree to be solely responsible for my (and/or my minor child/ward's, as applicable) own safety and to take every precaution to provide for my (and/or my minor child/ward's, as applicable) own safety and well-being while participating in the Games and/or the use of the equipment, facilities, and premises for the Games, including but not limited to inspecting and making my own assessment as to whether the Games are reasonably safe and suitable to participate in.

Liability:

In consideration of my participation (or the permission for my minor child/ward to participate, as applicable) in the Games and/or to use the equipment, facilities, and premises for the Games, with full knowledge of the possible risks, and intending to be legally bound by the terms of this Agreement, I hereby agree for myself (and/or my minor child/ward, as applicable) and respective heirs, assigns, personal representatives and next of kin to release and hold harmless the Arctic Winter Games from any and all liability claims, demands or any causes of action, and not to sue or otherwise make any claims against the Arctic Winter Games whatsoever which may arise during or as a result of my (and/or my minor child/ward's, as applicable) participation in the Games and/or the use the equipment, facilities, and premises for the Games.

I, and/or on behalf of my minor child/ward (as applicable), acknowledge and agree that this Release and Waiver is effective whether or not any loss, damage, injury or death to myself (and/or my minor child/ward, as applicable) results from the negligence, breach of contract or breach of any statutory or other duty of care including any duty of care owing under any applicable Occupiers Liability legislation on the part of the Arctic Winter Games. I, and/or on behalf of my minor child/ward (as applicable), understand that negligence means a failure to do an act which a reasonably careful person would do, or the doing of an act which a reasonably careful person would not do, under the same or similar circumstances to protect him or herself, or others, from accident, injury or death.

I, and/or on behalf of my minor child/ward (as applicable), understand that the Arctic Winter Games may be using or recommending the services of certain hotels, organizers, guides, facilities or other agencies in connection with the Games not directly controlled by the Arctic Winter Games (in this paragraph, a "**Third Party**"). I, and/or on behalf of my minor child/ward (as applicable), further understand that the Arctic Parties accept no responsibility for any acts or omissions of, or for any breach of contract, misrepresentation, negligence or error of such Third Parties, with respect to any and all matters in connection with the Games. I agree on behalf of myself and/or my minor child/ward (as applicable) to release and hold harmless the Arctic Winter Games from, and will not bring legal action against them for, any claims, demands, expenses, costs (including legal costs and a solicitor and his own client full indemnity basis), suits, debts, liabilities and causes of action which may arise out of or of be connected to any act or omission by any Third Party.

I, Participant, hereby affirm that I am over the age of majority and have the right to contract in my own name. I have read the above Agreement and the releases contained therein, prior to its execution, and I fully understand the contents thereof. I have signed this Agreement freely and voluntarily without any inducement, assurance, oral representations or guarantees being made to me. This Agreement and the releases contained therein shall be binding upon me and my heirs, legal representatives, assigns and next of kin to the greatest extent permitted by law. If any portion of this Agreement is later found to be invalid or unenforceable, it is agreed that the balance of the Agreement shall continue in full legal force and effect. It is agreed that any litigation involving the parties to this Agreement shall be brought solely within the Yukon and shall be within the exclusive jurisdiction of the Courts of the Yukon.

Participant First and Last Name (Print)

Signature

Date

Witness First and Last Name (Print)

Witness Signature

Date



IF SUBJECT IS A MINOR, PARENT OR GUARDIAN MUST SIGN BELOW:

I, the undersigned, being parent or guardian of the minor whose name appears above, hereby consent to the foregoing conditions and warrant that I have the authority to give such consent. I have read the above Agreement and the releases contained therein, prior to its execution, and I fully understand the contents thereof. I have signed this Agreement freely and voluntarily without any inducement, assurance, oral representations or guarantees being made to me. This Agreement and the releases contained therein shall be binding upon me and my heirs, legal representatives, assigns and next of kin to the greatest extent permitted by law. If any portion of this Agreement is later found to be invalid or unenforceable, it is agreed that the balance of the Agreement shall continue in full legal force and effect. It is agreed that any litigation involving the parties to this Agreement shall be brought solely within the Yukon and shall be within the exclusive jurisdiction of the Courts of the Yukon.

First and Last Name of Parent/Guardian

Signature of Parent/Guardian

Date

Witness First and Last Name (Print)

Witness Signature

Date

MAIL ALL DOCUMENTS TO:

Team Alaska
1120 Huffman Road ste 24-318
Anchorage, AK 99515

ATHLETE AND PARENT/GUARDIAN AGREEMENT

I, _____, as a participant for Team Alaska at the 2020 Arctic Winter Games, understand that there are expectations of me as to conduct and behavior as outlined in this Handbook and the Team Alaska Conduct and Discipline Code. I agree to abide by the rules and regulations set down by Team Alaska, the Host Society and the Arctic Winter Games International Committee. Should I fail to follow these regulations I realize my conduct shall be reviewed and I may be disciplined, up to and including removal from Team Alaska and the Games.

Signature of Participant: _____ Date _____

Should the participant be subject to discipline resulting in him/her being sent home at his/her expense, I agree to cover these costs.

Signature of Parent/Guardian: _____ Date _____

DRESS CODE AGREEMENT

I, _____, having read the 2020 Arctic Winter Games Team Handbook, acknowledge and understand that as a member of Team Alaska at the 2020 Arctic Winter Games, I hereby accept the clothing provided and agree to follow the dress code.

The clothing provided remains the property of Team Alaska and, if no sanctions are levied upon the participant at the conclusion of the Games, the clothing becomes the property of the participant.

SIGNATURE

DAY / MONTH / YEAR

MAIL ALL DOCUMENTS TO:

Team Alaska
1120 Huffman Road ste 24-318
Anchorage, AK 99515

COACH / CHAPERON / MISSION STAFF AGREEMENT

I, _____, as a participant coach, chaperone or mission staff for Team Alaska at the 2020 Arctic Winter Games, understand that there are expectations of me as to conduct and behavior as outlined in this Handbook and the Team Alaska Conduct and Discipline Code. I agree to abide by the rules and regulations set down by Team Alaska, the Host Society and the Arctic Winter Games Council. Should I fail to follow these regulations I realize my conduct shall be reviewed and I may be disciplined, up to and including removal from Team Alaska and the Games.

Date: _____

Signature of Participant: _____

Witness: _____

DRESS CODE AGREEMENT

I, _____, having read the 2020 Arctic Winter Games Team Handbook, acknowledge and understand that as a member of Team Alaska, at the 2020 Arctic Winter Games, I hereby accept the clothing provided and agree to follow the dress code.

The clothing provided remains the property of Team Alaska and, if no sanctions are levied upon the participant at the conclusion of the Games, the clothing becomes the property of the participant.

SIGNATURE _____ **DAY / MONTH / YEAR** _____

