



# 2010 ONE-EVENT PERMIT



I am aware that insurance is available through the Ontario Cycling Association by becoming a member of the Association I HAVE DECLINED TO PARTICIPATE IN THE PROGRAM.

Event Name			Date
Last Name	First Name	Date of Birth (YY/MM/DD)	Age as of Dec. 31, 2010 <input type="checkbox"/> Female <input type="checkbox"/> Male
Street Address	City	Postal Code	Phone #
Emergency Contact	Phone #	Citizenship	Email

## WAIVER, RELEASE & INDEMNITY

I \_\_\_\_\_ understand and agree that my participation in events, programs, races, or activities organized, operated, conducted and/or sanctioned by the Canadian Cycling Association and/or Provincial Associations and Various CCA Clubs and Members registered with CCA is conditional upon my execution of this document.

1. I am aware that cycling, and in particular competitive cycling, endurance and BMX racing, involves the possibility of injury or death.
2. I accept these risks, and all others arising from these events and programs, even if arising from the **negligence, gross negligence or negligent rescue** by those associated in any way with the **Canadian Cycling Association** events and programs I may be involved in, the venues at which these events and programs takes place or by those organizing, officiating, or participating in these events and programs throughout the year, including their respective officers, directors, employees, agents, servants, volunteers and representatives (the "Releasees").
3. I understand that all applicable rules for participation must be followed and that **SOLE RESPONSIBILITY FOR MY PERSONAL SAFETY REMAINS WITH ME**, including my physical and emotional preparation and fitness to participate in all events and programs throughout the year.
4. I undertake and agree to remove myself from participation if I sense or observe any unusual hazard or unsafe condition, or if, at any time, at any event or program, I feel unable or unfit to safely continue for any reason.
5. I give, a **FULL RELEASE AND WAIVER OF LIABILITY AND ALL CLAIMS** that I have, or may have in the future, against **Canadian Cycling Association, and all other Releasees** from all liability for any loss damage, injury or expense that I may suffer as a result of my participation in any part or parts of the events or programs or my presence at any venue at which they may take place, due to any cause whatsoever including the forms of negligence set forth in paragraph 2 above or from any breach of contract or statutory duty or other duty of care including any duty of care owed under the relevant Occupier's Liability Act, on the part of the Releasees.
6. I **AGREE NOT TO SUE** and I further agree **TO INDEMNIFY AND SAVE HARMLESS** the Releasees from all expenses, fees, liability or damage award or cost of any type whatsoever arising from my participation in these events or programs.

I HAVE READ AND UNDERSTOOD THIS WAIVER, RELEASE AND INDEMNITY. I am aware that by signing this agreement I am waiving substantial legal rights (on my behalf and on behalf of my heirs, executors, administrators and next of kin), including the giving up of my right to sue.

Applicant's Signature (I am 18 years old or older: if not, Parent(s) or Legal Guardian (s) must sign below)

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### PARENTAL CONSENT FOR MINOR PARTICIPANT and INDEMNITY AGREEMENT

I have read and understood the above waiver, release and indemnity, and have discussed the same signing above. I am satisfied the said minor understands the waiver and release and his/her obligations consideration of the participation of my minor child/ward I too agree to waive, release and indemnify the Releasees set out above. I am aware that by signing this agreement I am waiving substantial legal rights, which my minor child/ward heirs, executors, administrators and next of kin may have against the Releasees

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**YOU MUST COMPLETE THE BACK PAGE**

# CATEGORY SELECTION

**Category Selection is for Regional, Ontario Cup and Cyclo-cross Events ONLY**  
(Age as of December 31, 2010)

<b>MTB CROSS COUNTRY</b>			
Category	Age	Fee	Select
<b>8:30 AM Start</b>			
U17 (Cadet) Sport Male	15-16	\$5	
Beginner Male	17+	\$10	
Beginner Female	19+	\$10	
U17 (Cadet) Sport Female	15-16	\$5	
Junior Sport Female	17-18	\$10	
U15 (Minime) Male	13-14	\$5	
U13 (Peewee) Male	10-12	\$5	
U15 (Minime) Female	13-14	\$5	
U13 (Peewee) Female	10-12	\$5	
<b>9:30 AM Start</b>			
Master 40-44 Sport Male	40-44	\$10	
Master 45-49 Sport Male	45-49	\$10	
Master 50-54 Male	50-54	\$10	
Master 55-59 Male	55-59	\$10	
Master 60+ Male	60+	\$10	
Senior Sport Female	19+	\$10	
Master 30-39 Sport Female	30-39	\$10	
Master 40+ Sport Female	40+	\$10	
Single Speed Men/Single Speed Women	15+	\$10	
Try-an-O-Cup Male	19+	\$10	
<b>11:30 AM Start</b>			
Senior Sport Male	19+	\$10	
Junior Sport Male	17-18	\$10	
Master 30-34 Sport Male	30-34	\$10	
Master 35-39 Sport Male	35-39	\$10	

<b>ROAD/CX</b>			
*For Cyclo-cross it is your age as of Dec 31, 2011			
Category	Age	Fee	Select
<b>Male</b>			
U11 (Squirt) Male	10	\$5	
U13 (Peewee) Male	11-12	\$5	
U15 (Minime) Male	13-14	\$5	
U17 (Cadet) Male	15-16	\$5	
Junior Male	17-18	\$10	
Senior 4 Male	19+	\$10	
Master 3 Male	35+	\$10	
<b>Female</b>			
U11 (Squirt) Female	10	\$5	
U13 (Peewee) Female	11-12	\$5	
U15 (Minime) Female	13-14	\$5	
U17 (Cadet) Female	15-16	\$5	
Junior Female	17-18	\$10	
Senior 3 Female	19+	\$10	
Master 30-39 Female	30-39	\$10	
Master 40+ Female	40+	\$10	



**Sanctioned by the  
Ontario Cycling Association**

## CITIZEN RACES (Above Categories Not Applicable)

	Fee
<b>Citizen Event (All Ages and Categories)</b>	<b>\$5</b>

### IMPORTANT NOTES

Racers can purchase a combined 3 One-Event Racing Permits (a.k.a. 1 days) per year. After the third 1 day, you must purchase a UCI licence or Citizen Permit (if applicable).

**The OCA closely monitors the number of One-Event Racing Permits issued per rider.**

By completing this form you have given permission for the Ontario Cycling Association to use your likeness in the form of photographs for promotional purposes without notification.

Occasionally, our mailing list is made available to reputable companies and organizations whose products, services and events may be of interest to you. If you prefer not to have your name made available, please check the box below.

**I do not want to be on a mailing list**

Payment Options
Cash _____
Cheque _____
Credit Card # _____ - _____ - _____
Exp ____ - ____
Signature: _____

Paid? (Y/N)	Seller's Initials	Race Number