



Nova Scotia Lifeguard Service Presents
2008 Junior Lifeguard Competition

Junior Lifeguard Registration

Please use one form per competitor

Club:		
First Name:	Last Name:	
Age:	Sex: male or female	
Birth Date (yr/month/day):		
Mailing Address:		
City:	Province:	
Postal Code:		
Home Phone:		
Email contact:		
Medical Issues:		
Note: You will be entered into all events. You may scratch at the marshalling desk any events that you do not wish to partake in.		
Registration must be received by Tuesday July 29 th , 2008		
Entry Fee is \$20.00		
Late Fee \$10.00		
TOTAL AMOUNT OWING		

Cheques are payable to the Nova Scotia Lifeguard Service

2008 NSLS JUNIOR LIFEGUARD COMPETITION – WATERFRONT

Waiver & Release Form

Please read carefully before signing

1. Conduct

I agree to abide by the rules, regulations and code of conduct of the championship, and further to behave in a manner consistent with ideals of good sportsmanship.

2. Voluntary Assumption of Risk

As a competitor in a lifeguard competition, I recognize that there are certain risks inherent in the activity as a result of factors including but not limited to, stress, number of people, water temperature and conditions. I have prepared myself for the competition and know of no factor or condition which should be disclosed to the organizers or which would make it unsafe for me to compete. I voluntarily assume all risks, both physical and legal including but not restricted to, loss of or damage to property, and personal injury including permanent disability or death.

3. Waiver of Liability

As a condition of entry and in consideration of my application as an individual or as a part of a team being accepted, I hereby waive my right to make any claim, whether for negligence or otherwise against the Lifesaving Society, the host, the facility operator, owner or occupier, the sponsors, the organizing committee or any of the servants, agents, affiliates, volunteers, judges, officials or other persons involved in the organization or running of the competition, events or associated activities. I further agree to indemnify and hold harmless all of the above, from any claim made on my behalf or as a result of injury to my person or property. I recognize that competitors are responsible for their own medical coverage. I hereby give permission to have the staff arrange for any emergency medical care including hospitalization if necessary. In all instances where children are involved, attempts will be made to contact parent or guardian first.

4. Model Release

I transfer to the Lifesaving Society all rights whatsoever which I have in photographs and/or videos which photographers may have taken. I consent to the use of the photographs/videos for all purposes whatsoever, including without limitation, television, publications, and any trade or advertising purposes.

I have carefully read and understood the conditions of entry and in consideration for being allowed to compete, I have executed them voluntarily intending to be bound thereby and intending these conditions to be binding of my heirs, personal representatives and assigns. In addition, I attest that the age of the entrant as the first day of the championships is correct as stated on the registration form.

Print name

Signature (Parent or Guardian)

Date

Print name

Signature (Competitor)

Date
