

Waiver:

I hereby release the Pentathlon des neiges, their members and agents, all volunteers, partners, sponsors and any other person connected with the Pentathlon des neiges from all liability for any injuries, damages or losses. I acknowledge and understand that participation in this event involves risks to my health and safety, including death, and I willingly accept these risks. I also give full permission for use of my name and/or picture in connection with any publicity of this event.

**Team's name:** \_\_\_\_\_

**Captain**

**#1 Participant's name :** \_\_\_\_\_ Postal code \_\_\_\_\_  
Emergency Contact : \_\_\_\_\_ Phone \_\_\_\_\_  
Signature : \_\_\_\_\_

**Team's members**

**#2 Participant's name :** \_\_\_\_\_ Postal code \_\_\_\_\_  
Emergency Contact : \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship with captain : \_\_\_\_\_  
Signature : \_\_\_\_\_

**#3 Participant's name :** \_\_\_\_\_ Postal code \_\_\_\_\_  
Emergency Contact : \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship with captain : \_\_\_\_\_  
Signature : \_\_\_\_\_

**#4 Participant's name :** \_\_\_\_\_ Postal code \_\_\_\_\_  
Emergency Contact : \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship with captain : \_\_\_\_\_  
Signature : \_\_\_\_\_

**#5 Participant's name :** \_\_\_\_\_ Postal code \_\_\_\_\_  
Emergency Contact : \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship with captain : \_\_\_\_\_  
Signature : \_\_\_\_\_