



Workshops

Registration Form

Name _____ E-mail _____

Mailing Address _____ Code _____

City _____ Province _____ Country _____

Home Number _____ Work Number _____ Cell _____

Birthday _____ Gender _____

How do you hear about us _____

I am registering for:

| | | |
|--|------|--------------------------|
| INTRODUCTION to Orienteering - 2h | \$25 | <input type="checkbox"/> |
| INTERMEDIATE Techniques and Strategies for Orienteering - 3h | \$45 | <input type="checkbox"/> |
| ADVANCED Techniques and Strategies for Orienteering - 4h | \$55 | <input type="checkbox"/> |
| Navigational techniques for ADVENTURE RACING - 4h | \$55 | <input type="checkbox"/> |
| NIGHT Navigation - 4h | \$65 | <input type="checkbox"/> |
| Learn Orienteering in the wilderness - 1 day intensive | \$85 | <input type="checkbox"/> |
| T-Shirt (free with Learn O' in the wilderness) Size _____ | \$15 | <input type="checkbox"/> |

| | |
|--------------------------|----------------|
| Where _____ | When _____ |
| Please, specify location | Preferred date |

Total _____ \$

I am using _____ % or _____ \$ discount as: _____

Discount _____ \$

Please, describe what kind of discount you are using and it's amount in percent or dollars

Please calculate total discount

Total - Discount _____ \$

Waiver

I, the applicant, on behalf of myself, members of my family, my heirs, executors, administrators and assigns, recognizing that orienteering is a hazardous sport, hereby forever release, discharge and hold harmless Ultimate Outdoor Adventures, Orienteering Association of B.C., and Canadian Orienteering Federation representatives and agents and any and all persons who own or occupy the lands which may be used for this event, for any injury, loss or damage to my person or property howsoever caused, arising out of or in connection with my taking part in the events and activities which I am hereby entering. I will provide the organizers with all MEDIC-ALERT or medical information that they should be aware of.

I ACKNOWLEDGE HAVING READ, UNDERSTOOD AND AGREED to the above waiver.

Print Name: _____

Signature: _____

Make check payable to Ultimate Outdoor Adventures, #29-7155 MacPherson Avenue • Burnaby • BC • V5J 5G9

