



2017 WINTER CLINIC!

Sunday, December 17, 2017

Fencing, Laser-Run Clinic & Laser-Run Time Trial
University of Toronto Athletic Centre

12 pm to 5 pm
University of Toronto Field House Court & Track

Harbord Street, Toronto, M5S 2W6, Ontario
www.physical.utoronto.ca/FacilitiesAndMemberships/Athletic_Centre/Location.aspx

Get ready for our Winter Invitational on January 6 & the 2018 season!
Sign up by December 1! Cost: \$ 40.00
After December 1: \$50.00

***Register a friend or family member to try Laser-Run for the first time
for \$20.00 & receive a \$20.00 discount on your registration!***

Fencing, followed by Laser-Run clinic, time trial.

Fencing clinician: Samuel Gallagher Pelletier

Samuel Gallagher Pelletier Has coached Olympian Pentathlete Donna Vakalis, and has coached Epee Team Members Lyssov, Nikola Damjanovic, Sahil Bablani and Cindy Gao, who compete on the International Fencing circuit. He has 3 years of experience coaching at Vango in China, and was instrumental in setting up Vango's first Canadian branch. As an athlete, Samuel was 2008 National Champion, 2011 Chinese Champion and has represented Canada at several Fencing World Cups.

Laser-Run clinicians: Loreto Gajardo/Shawn Lagrange

Loreto Gajardo, currently residing in Toronto, competed for Chile at the Toronto 2015 Pan Am Games where she obtained the world record for the fastest women's laser shooting time; a record that she held until 2017.
Shawn LaGrange is a long-time Pentathlon volunteer and currently president of Pentathlon Canada and Ontario. He is a certified UIPM Technical Delegate and UIPM Level 1 coach.

Tentative additional Laser-Run clinicians to be confirmed depending their schedules:

Donna Vakalis- 2008 and 2012 Olympian Donna Vakalis needs no introduction. At the Toronto 2015 Pan Am Games, Donna had a lightning fast laser run to finish 4th and clinch her spot for her second consecutive Olympic Games.

George Skene - Is a long-time volunteer with Pentathlon Canada. He mentored several development athletes in 2016. He represented Canada at the 1972 and 1976 Olympics.

Please send the completed clinic entry form & waiver by **December 1**
by email to the Pentathlon Ontario Secretary at the email address below.

A PayPal Invoice will be sent on receipt

For those wishing to pay by cheque instead, please contact the secretary at jprudolph1@gmail.com
and mail entry form and cheque prior to **December 3**

Please direct any questions by email to: Shaun Lagrange: salagrange@sympatico.ca
An email confirmation will be sent upon clinic entry and payment receipt.

2017 December Toronto Clinic Entry Form

Last Name:	First Name:
Address:	
Postal Code:	Email:
Phone: ()	Cell: ()
Birth Date (YY/MM/DD) :	Division currently competing :

PENTATHLON ONTARIO CLINIC WAIVER

Waiver and Release: I understand that participation in any of all of the sports of pistol shooting, fencing, running and swimming involves certain risks and serious dangers which are inherent to the sport and I hereby release the Pentathlon Ontario ("P.O."), Sports facilities, and their Directors, Officers, Officials, Representatives, Servants and Agents from any liability or costs arising out of or in connection with any activity of Pentathlon, including any liability due to the negligence or a breach of contract of its servants or agents in the course of my participating in the sport, or training, for a P.O. event.

I further confirm that I am over the age of majority in my province, (alternatively) I understand that my parent or guardian is required to sign this Waiver before I can participate in any activity under the auspices of the Pentathlon.

Athlete name: _____ Signature _____

MINORS: I concur that the above named minor is in good physical condition and may participate in Pentathlon clinic activities. I have read and understood the above waiver and my signature indicates agreement with both the application for participation in this sport and with the waiver.
Patient/Guardian Consent: Consent is hereby given for such routine diagnostic procedures and medical treatment by an attending physician, his or her assistants or his or her designees as is necessary in his or her judgment should such care be required by either myself or the above mentioned athlete.

Parent/Guardian Name: _____ Signature _____ date: _____

PENTATHLON CANADA WAIVER

Covering all Modern Pentathlon Competitions, Clinics, Local, Provincial, National, International

I am aware that modern pentathlon involves many inherent risks, dangers and hazards, including but not limited to, the use and operation of air pistols, fencing equipment, equestrian equipment, horses and obstacles, cross-country running terrain with associated hazards, negligence on the part of event organizers, event volunteers, coaches, other athletes and spectators.

I freely accept and fully assume all such risks, dangers, and hazards and the possibility of personal injury, property damage or loss resulting from such risks, dangers, and hazards. In consideration of Pentathlon Canada allowing me to take part as a manager, coach or athlete in Modern Pentathlon competitions, whether they be local, provincial, national or international, (hereafter referred to as "the Competitions"), I hereby agree as follows:

TO ASSUME AND ACCEPT ALL RISKS, DANGERS AND HAZARDS in connection with my participation in, and/or travel to or from, the Competitions and/or clinics;

TO WAIVE ANY AND ALL CLAIMS that I may have against the Pentathlon Canada, its directors, officers, employees, agents and representatives (all of whom are collectively referred to as "Pentathlon Canada");

TO RELEASE Pentathlon Canada from any and all liability for any loss, damage, injury or expense that I, or my next of kin, may suffer or incur as a result of my participation in, and/or travel to or from, the Competitions and/or clinics, due to any cause whatsoever, INCLUDING NEGLIGENCE ON THE PART OF Pentathlon Canada;

TO HOLD HARMLESS AND INDEMNIFY Pentathlon Canada from any and all liability for property damage or personal injury suffered by myself or by a third party as a result of my participation in, and/or travel to or from, the Competitions and/or clinics.

I have read and understood this Waiver prior to signing it and am aware that by signing this document, I am accepting the terms of this Waiver and am thereby affecting the legal rights and liabilities of myself, my family, administrators and assigns in relation to Pentathlon Canada. I confirm that I am over the age of majority in my Province.

(For those under the age of majority in their Province) I understand that my parent or guardian is required to sign this Waiver before I can participate in any competition under the auspices of Modern Pentathlon.

Signature of Athlete _____ Print Name _____

Signature of Parent (athletes under 18) _____ Print Name _____