

# ARE HOU COMP UP FOR THE CAMA CHALLENGE? TEAM

COMPETITIVE

CAMARADERIE

ITE AM BUILDING

Friday June 21 Kin Coulee Park 1 pm - 4 pm

# CALL TODAY TO ENTER YOUR TEAM

Proceeds to Support HALO RESCUE •







For more information call Darlene @ 403.594.0172

Sponsorship Opportunities Available

# The 3rd **Annual**

## ARE YOU UP FOR THE CHALLENGE?

Friday June 21 Kin Coulee Park 1 pm - 4 pm

#### **BATTLE PARTICIPANTS GENERAL REQUIREMENTS**

#### **HAVE FUN!!**

### WHAT IS BATTLE OF THE BUSINESSES?

- 1-Day Business Team Competition
- Team Building, Camaraderie, Challenge
- Network with Other Businesses
- Maximum 10 Business Teams
- 8 Co-Ed, Fun, Friendly Events
- Halo Rescue Fundraiser

**EVENTS** 

TUG-A-WAR WATER BUCKET BRIGADE VOLLEYBALL **TEAM SKI EVERYONE CAN SACK RACE PARTICIPATE IN!! NEW EVENTS!** 

- All participants must be on the company's payroll or contract employees.
- Co-ed team size must include 8 people. (\$75 for each additional player)
- Companies with less than 25 employees may include spouses of employees as team members Or TEAM **UP WITH ANOTHER BUSINESS!**
- All participants must be at least 18 years old
- The Team Entry Fee is \$800 (includes gst)
- Support the Battle Bucks Challenge!

Brought to you by





#### **BATTLE BUCKS CHALLENGE**

Let's Team Up to Raise Money to Support HALO AIR AMBULANCE

Will You Take the Battle Bucks Challenge?

Join us in the Challenge to help raise funds for HALO Air Ambulance; the only air ambulance medevac helicopter dedicated to serving southern Alberta.

Collect pledges, get out of the office to participate in the Battle Event Activities! Work as a team to raise dollars and qualify for the BUCKS Challenge for your chance to win prizes.

100% OF THE BATTLE BUCKS GO TO SUPPORT ..





# Our Team is Taking the Challenge!

#### **REGISTRATION FORM**

#### Friday June 21 Kin Coulee Park 1 pm - 4 pm

# Let's Get Your Shirts Ordered Please Provide Shirt Sizes \_\_\_\_XS \_\_\_\_L \_\_\_S \_\_\_XL \_\_\_M \_\_XXL

Unisex Shirt Size Guidelines:				
UNISEX WOMEN MEN				
	(size)	(chest inches)		
XS	0-4	30-32		
S	6-8	34-36		
М	10-12	38-40		
L	12-14	42-44		
XL	16-18	46-48		
XXL	20-22	50-52		

T-shirt orders need to be in by May 30, 2024

#### **BROUGHT TO YOU BY:**





#### **TEAM CONTACT INFORMATION:**

ivame		Email	Cell
Compa	any Name		
Compa	any Address		
TEAM	NAME:		
Signa	ture		
PLEAS	SE CHECK: GST ii	ncluded in prices	
Te	eam Entry \$800	Event Sponsor \$300	TOTAL \$:
M	lajor Sponsor \$2500 +	☐ In-Kind Sponsor	
	linor Sponsor 1500 - \$2500	Volunteer	
V	/ill your team take part i	n the Battle Bucks Challenge?	Absolutely
		n heard about this event? (So	
PAYN	MENT INFORMATION	l:	
		MasterCard Other ble to JUST BE TC. A receipt w	
Anv S	special Instructions or C	omments:	

Return completed form to JUST BE TC @ dar@justbetc.ca. as soon as possible before May 30, 2024

Questions? Call Darlene @ 403.594.0172

## RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT

(hereinafter referred to as the "Release Agreement")

BY SIGNING THIS DOCUMENT YOU WILL WAIVE OR GIVE UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE OR CLAIM COMPENSATION FOLLOWING AN ACCIDENT

PLEASE READ CAREFULLY!

INDIVIDUAL NAME:

Event Name	BATTLE OF THE BUSINESSES 2024
	Just Be TC, ATB and its (their) hosts, volunteers, sponsors, donation recipients, City of Medicine Hat, and assigns (all
	of whom are Hereinafter referred as "the Releasees")

#### **DEFINITION**

In this Release Agreement: the term "Battle Events" shall include all activities, services and use of the grounds either provided by or arranged by the Releasees, including, but not limited to: orientation and instruction sessions; recreational activities undertaken during the event, either within or beyond the designated boundaries, including in the park, roads and field.

#### RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

In consideration of the RELEASEES agreeing to my participation in the Battle Events and permitting my use of the activities, equipment and other facilities, and for other good and valuable consideration, the receipt and sufficiency of which is acknowledged, I hereby agree as follows:

- 1. TO WAIVE ANY AND ALL CLAIMS that I have or may in the future have against the RELEASEES AND TO RELEASE THE RELEASEES from any and all liability for any loss, damage, expense or injury, including death, that I may suffer or that my next of kin may suffer, as a result of my participation in Battle of the Business Events, DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, INCLUDING ANY DUTY OF CARE OWED UNDER THE OCCUPIERS LIABILITY ACT, ON THE PART OF THE RELEASEES, AND FURTHER INCLUDING THE FAILURE ON THE PART OF THE RELEASEES TO SAFEGUARD OR PROTECT ME FROM THE RISKS, DANGERS AND HAZARDS OF PARTICIPATING IN THE BATTLE EVENTS REFERRED TO ABOVE:
- 2. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES for any and all liability for any property damage, loss or personal injury to any third party resulting from my participation in the Battle Events;
- 3. This Release Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives, in the event of my death or incapacity;
- 4. This Release Agreement and any rights, duties and obligations as between the parties to this Release Agreement shall be governed by and interpreted solely in accordance with the laws of the province where the Battle Events take place and no other jurisdiction; and
- 5. Any litigation involving the parties to this Release Agreement shall be brought solely within the province where the Battle Events takes place and shall be within the exclusive jurisdiction of the Courts of that province.

In entering into this Release Agreement I am not relying on any oral or written representations or statements made by the Releasees with respect to the safety of participating in the Battle Events, other than what is set forth in this Release Agreement.

ICONFIRM THAT I HAVE READ AND UNDERSTOOD THIS RELEASE AGREEMENT PRIOR TO SIGNING IT, AND I AM AWARE THAT BY SIGNING THIS RELEASE AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS, ASSIGNS AND REPRESENTATIVES MAY HAVE AGAINST THE RELEASEES.

Signed thisday of	, <u>2</u> 0
Witness	
Please print name clearly	
Please print name clearly	

Please Print a waiver for each participant; as each participant must sign their own waiver; as per insurance.

Return completed form to JUST BE TC @ dar@justbetc.ca.
By May 30, 2024



#### **BATTLE OF THE BUSINESSES 2024**



#### Participant Waiver/Consent

By attending this event and signing this form, you are consenting to the Release Agreement attached and agree to release JUST BE TC, ATB & CITY OF MEDICINE HAT and their volunteers, staff and their partners from any liability.

By signing this form, you are granting permission to JUST BE TC, ATB & CITY OF MEDICINE HAT to have unlimited right; without charge, to use your likeness in photos, videos, recordings and in all media now known, or hereafter created, to be used and distributed in perpetuity for promotional and publicity purposes.

The Battle of the Businesses 2024 is held rain or shine. No refunds.

#### 2024 Team Participants:

Name: (Please print name clearly)	Signature:
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

Return completed form to JUST BE TC @ dar@justbetc.ca. By May 30, 2024

#### **BATTLE BUCKS**

Team Summary Sheet

DATTLE
BATTLE
- OF THE-
BUSINESSES

Team Name	
Coach/Battle Bucks Coordinator	

Please fill out the summary sheet with each individual's name and dollar total collected. Return on Battle Day. The Battle Bucks is the fundraiser portion of the Battle of the Business where **100% of Bucks raised** go directly to support HALO AIR AMBULANCE.

	INDIVIDUAL'S NAME	Company	Dollars
	NAME	Matched	Collected
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
	Totals		
	Grand Total		



NAME OF BUSINESS:

## BATTLE BUCKS CHALLENGE



In Order to Receive a Tax Receipt, Please Make Cheques Payable to Halo Air Ambulance

**EMPLOYEE:** 

Donors Name	Phone #	Amount	Paid



# BATTLE BUCKS CHALLENGE



In Order to Receive a Tax Receipt, Please Make Cheques Payable to Halo Air Ambulance

NAME OF BUSINESS:	EMPLOYEE:		
Danara Nama	Dhana #	Amount	Daid
Donors Name	Phone #	Amount	Paid