



Innisfil Community Events Corporation

1145 Innisfil Beach Road,
P.O. Box 10083, Innisfil, ON L9S 4B7

info@icecorp.org

www.icecorp.org

REGISTRATION, GUIDELINES AND PLEDGE PACKAGE

ICECorp 2019 Innisfil Polar Bear Dip

Saturday February 23rd, 2019 @ 1:30pm

Innisfil Park, 676 Innisfil Beach Road, Innisfil, ON

Please find the registration, guidelines and pledge package for participation in the ICECorp Innisfil Polar Bear Dip, 2019. **PLEASE READ IN FULL AS CERTAIN CAUTIONS AND WAIVERS INCLUDED.**

Please complete the required forms and turn them in at the Innisfil Park Gate House Registration Trailer prior to the event.

- WAIVER FORMS **MUST BE COMPLETED** IN ORDER FOR INDIVIDUALS TO PARTICIPATE.
- **BY SIGNING WAIVERS ALL PARTICIPATES ACKNOWLEDGE, UNDERSTAND AND AGREE TO THE FOLLOWING:**
 - *That jumping into cold water from a frozen ice surface has certain risks and may result in injury or medical conditions to some people.*
 - *That the Polar Dip is a fundraising event and media will be present which may result in photographs & video clips may be taken which may identify jumpers in various electronic and social media. Jumpers consent to the use of their images.*
 - *That they understand that ICECorp and its partners take reasonable and appropriate safety precautions to prevent injury or other unforeseen circumstances from taking place, before, during and following this event.*
- **EACH PARTICIPANT ACKNOWLEDGES THAT THEY ARE PARTAKING IN THE 2019 ICECORP INNISFIL POLAR DIP - **AT THEIR OWN RISK**, AND WILL NOT HOLD ICECORP OR ANY OF ITS PARTNERS RESPONSIBLE IN ANY WAY FOR INJURY OF ILLNESS THAT MAY RESULT.**

Location of Event:	Lake Simcoe/Innisfil Park, 676 Innisfil Beach Road, Innisfil, ON
Date / Time of Event:	Saturday February 23 rd , 2019 at 1:30pm
Registration Location:	Innisfil Park Gatehouse – 12:00pm to 1:30pm.
Registration Fee:	\$25 per Polar Dip Jumper (waived if \$25 or more received in form (waived if \$25 or more received in pledges to designated fundraising causes)
T-Shirts:	“I survived the Innisfil Polar Bear Dip” T-shirts will be given to participants upon registration.
Contact:	Doug Loughheed, 705-623-6296, email: dlough2012@gmail.com

ICECorp wishes to thank all the participants and sponsor donors for making the 2019 Polar Bear Dip an entertaining and successful event. Pledges received are collected by ICECorp and will be equally split and donated to the following causes:

- **Rizzardo Health & Wellness Centre Fundraising Committee**
- **Innisfil Food Bank**



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ICECORP INNISFIL 2019 POLAR BEAR DIP PARTICIPANT GUIDELINES

ALL POLAR BEAR DIP PARTICIPANTS MUST ACKNOWLEDGE & SIGN THEY WILL COMPLY WITH EVENT RULES AND CONDITIONS. FAILURE TO DO SO WILL RESULT IN ICECORP OFFICIALS DENYING THE RIGHT TO PARTICIPATE.

Preamble:

ICECorp is a non-profit fundraising organization which puts on special events in Innisfil. Pledge proceeds received will be equally split and donated to the following:

- Rizzardo Health & Wellness Centre Fundraising Committee (a new medical facility for Innisfil located at the IRC to open in 2019)
- Innisfil Food Bank (supporting needy families and administered by Innisfil Community Church)

ICECorp members, volunteers and its partners takes the necessary reasonable precautions to ensure a safe and secure Polar Bear Dip event for participants, spectators, and others before, during and following the event. Polar Bear Dippers understand that they are participating at their **OWN RISK**.

Rules and Conditions of Participation:

Your Safety:

1. All participants must be at least 18 years of age. Those under 18 must be accompanied by a parent and/or guardian who must sign the waiver and guidelines.
2. It is recommended to parents / guardians that children under the age of 9 years of age should not participate. ICECorp reserves the right to decline participation of anyone that in their sole discretion may be unhealthy or unsafe!
3. Emergency Personnel will be in attendance to ensure a safe event.

What to wear:

1. Footwear to protect your feet on the way to and from your dip in the lake.
2. Have a warm blanket and towels to cover yourself before and after the dip
3. It is recommended that a change of clothes be brought with you.
4. Prizes awarded for best dressed costume ~ be creative

Registration & Pledges:

1. You must bring your pledge form and all money to the registration desk prior to your dip in the lake. Minimum Pledge is \$25 which will be your registration fee. The registration fee is used to cover insurance and other expenses needed in order to ensure a successful, safe and entertaining event.
2. Pledges in excess of \$25 registration fee will be turned over to the charitable cause authorized by the ICECorp Board of Directors as identified above. Fundraising results will be announced in local media.
3. All cheques shall be made payable to Innisfil Community Events Corporation (ICECorp).

On Polar Dip Day February 23, 2019:

1. Register with ICECORP starting at 12:00 noon at Innisfil Park gatehouse near the government dock.
2. All participants **must sign** a waiver. Registrants under the age of 18 must be accompanied by a parent and/or guardian, who also must sign waiver.
3. Bring your pledge sheet and all donations. Upon registration you will be provided with a number which is the order you will do your Polar Bear Dip
4. You will receive an "I survived the Innisfil Polar Bear Dip" T-shirt upon registration.

SURNAME	FIRST NAME	AGE
SIGNATURE: (also guardian if required)		



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POLAR BEAR DIP ENTRY FORM

Surname:	First Name:	Age:
Address:		
Email Address:		Contact Phone Number:
Signature:		

[NOTE: Each Person who is jumping MUST sign this waiver form and submit same to ICECorp Registration prior to Polar Bear Dip event – Failure to do so will result is forfeiture of right to jump in the Polar Bear Dip.]

RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS AND INDEMNITY:

In consideration of Innisfil Community Events Corporation (ICECORP) accepting this entry, I hereby acknowledge the inherent risk, hazards and dangers involved in participating in the Polar Bear Dip, including loss of consciousness, hypothermia, heart attacks and other life-threatening conditions due to large and sudden changes in environmental temperature. I hereby assume and accept any and all risk of my injury, paralysis or death and agree to abide by all Polar Bear Dip rules, regulations and guidelines. I, on my own behalf and on behalf of my heirs, executors and administrators, hereby waive and release, indemnify and hold harmless Innisfil Community Events Corporation (ICECORP), its fundraising partners, and the Town of Innisfil and each of its elected officials and representatives from and against any and all claims, actions, causes of action, liabilities, suits, expenses, breaches of statutory duty of care and negligence of any kind or nature, whether foreseen or unforeseen, arising directly or indirectly out of any damage, loss, injury, paralysis or death to me or my property arising out of my participation in the Polar Bear Dip.

Signature: _____

IF UNDER 18 YEARS OF AGE, PARENT OR GUARDIAN MUST SIGN THE FOLLOWING:

In consideration of the above minor being permitted to participate in the Polar Bear Dip, I, the undersigned parent and/or guardian of the above minor, for himself/herself and on behalf of said minor, hereby join in the foregoing release, waiver, assumption of risks and indemnity, and hereby agree to save and hold harmless and indemnify Innisfil Community Events Corporation ICECORP, its fundraising partners, and the Town of Innisfil and each of its elected officials and representatives from and against any and all claims, actions, causes of action, liabilities, suits, expenses, breaches of statutory duty of care and negligence made or brought by said minor or by anyone on behalf of said minor, as a result of said minor’s participation in the Polar Bear Dip.

Name of Guardian: _____ **(PRINT)**

Signature: _____



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POLAR BEAR DIP PLEDGE SHEET

The 2019 ICECorp Innisfil Polar Bear Dip will be held on Saturday February 23, 2019 at Innisfil Park starting at 1:30pm. Pledges collected will be donated equally to:

- Rizzardo Health & Wellness Centre Fundraising Committee (a new medical facility for Innisfil located at the IRC to open in 2019)
- Innisfil Food Bank (supporting needy families and administered by Innisfil Community Church)

We thank Polar Dip jumpers and their pledge sponsors for their support. Should the charitable organization be a registered charity any pledge over \$20 may receive a tax receipt from the organization, if requested, before December 31, 2019.

Name of Person jumping in the 2019 ICECorp Innisfil Polar Bear Dip			
Name:		Email Address:	
Pledge Sheet			
<i>In support of the named person I / We are pledging him/her for the following amount and agree that pledge funds be forward to Innisfil Community Events Corporation (ICECorp) for donation to the Innisfil Health Hub Fundraising committee</i>			

Name:			
Address (including Postal Code):			Phone Number:
Pledge Amount	Amount Collected	Method of Payment CASH / CHEQUE	Tax Receipt Requested YES / NO

Name:			
Address (including Postal Code):			Phone Number:
Pledge Amount	Amount Collected	Method of Payment CASH / CHEQUE	Tax Receipt Requested YES / NO

Name:			
Address (including Postal Code):			Phone Number:
Pledge Amount	Amount Collected	Method of Payment CASH / CHEQUE	Tax Receipt Requested YES / NO

Name:			
Address (including Postal Code):			Phone Number:
Pledge Amount	Amount Collected	Method of Payment CASH / CHEQUE	Tax Receipt Requested YES / NO



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Name of Person jumping in the 2019 ICECorp Innisfil Polar Bear Dip			
Name:		Email Address:	
Continuation Pledge Sheet			
Name:			
Address (including Postal Code):			Phone Number:
Pledge Amount	Amount Collected	Method of Payment CASH / CHEQUE	Tax Receipt Requested YES / NO
Name:			
Address (including Postal Code):			Phone Number:
Pledge Amount	Amount Collected	Method of Payment CASH / CHEQUE	Tax Receipt Requested YES / NO
Name:			
Address (including Postal Code):			Phone Number:
Pledge Amount	Amount Collected	Method of Payment CASH / CHEQUE	Tax Receipt Requested YES / NO
Name:			
Address (including Postal Code):			Phone Number:
Pledge Amount	Amount Collected	Method of Payment CASH / CHEQUE	Tax Receipt Requested YES / NO
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Continuation Pledge Sheet			
Name:			
Address (including Postal Code):			Phone Number:
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Address (including Postal Code):			Phone Number:
Pledge Amount	Amount Collected	Method of Payment CASH / CHEQUE	Tax Receipt Requested YES / NO
Name:			
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Name:			
Address (including Postal Code):			Phone Number:
Pledge Amount	Amount Collected	Method of Payment CASH / CHEQUE	Tax Receipt Requested YES / NO
Name:			
Address (including Postal Code):			Phone Number:
Pledge Amount	Amount Collected	Method of Payment CASH / CHEQUE	Tax Receipt Requested YES / NO

Pledge Total _____



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Name:		Email Address:	
Continuation Pledge Sheet			
Name:			
Address (including Postal Code):			Phone Number:
Pledge Amount	Amount Collected	Method of Payment CASH / CHEQUE	Tax Receipt Requested YES / NO
Name:			
Address (including Postal Code):			Phone Number:
Pledge Amount	Amount Collected	Method of Payment CASH / CHEQUE	Tax Receipt Requested YES / NO
Name:			
Address (including Postal Code):			Phone Number:
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