



100 John West Way
Aurora, Ontario
L4G 6J1
(905) 727-3123
aurora.ca

Town of Aurora
Canada Day Parade Registration Form
Community Services

Thank you for applying for Aurora's Canada Day parade. Applications must be received by **Friday, June 9, 2023**. You will be notified within 7 business days of The Town of Aurora receiving your application if your entry has or has not been approved.

Participant Information

Organization Name _____

Contact Name _____

Address _____

Town/City _____ Postal Code _____

Phone (daytime/evening) _____ Email address** _____

I wish to receive notice of other Town events and programs via email (check box)

Float Information

Please circle and complete all sections that apply:

Float Vehicle Walking Group Mascots Music playing

Other _____

Number of participants involved with your entry: _____

Please describe in detail your float decorations and theme:

*Vehicle Type and length: _____

**Please note: Accurate length of entry is required as there is limited space is available in the parade.*

I understand we **cannot** distribute parade handouts during the parade.
(Please initial) _____



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Payment Information

The fees for participating are as follows:

\$81.25	Town of Aurora-based business
\$162.40	Non-Town of Aurora based-business
FREE	Non-profit organizations and schools

VISA Mastercard Card # _____ Exp: _____

Name on Card: _____ CSV # _____

Please include payment with your application. All funds received will be receipted.
The Town of Aurora reserves the right to refuse or limit entries.

Submit completed application form and waiver form with payment (cheques are to be payable to "Town of Aurora") to: Town of Aurora, 100 John West Way, Box 1000, Aurora, ON L4G 6J1, Attn: Canada Day Parade, email sreynolds@aurora.ca.

Thank you for your interest in Aurora's Canada Day Parade!



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THE CORPORATION OF THE TOWN OF AURORA

**ASSUMPTION OF RISKS, RELEASE OF LIABILITY,
AND INDEMNITY AGREEMENT**

**BY SIGNING THIS DOCUMENT YOU ARE WAIVING CERTAIN LEGAL RIGHTS,
INCLUDING THE RIGHT TO SUE – PLEASE READ CAREFULLY**

TO: The Corporation of the Town of Aurora, its members of council, officers, employees, directors, volunteers, agents, or representatives (hereinafter called the “Releasees”)

ASSUMPTION OF RISK

I, _____ (the “Participant”) acknowledge that I wish to participate in Aurora’s Canada Day Festivities (the “Event”) as indicated on the Community Zone Application Form (the “Form”). I am aware that doing so may expose me to risks associated with or contributed to, by natural and manmade terrain, climatic conditions, my own physical condition, actions of the “Releasees” and other third parties, vehicular traffic, tools and equipment and other hazards associated with the Event. I am aware that such risks may result in personal injury, illness, loss of life or property damage, and I freely assume these risks.

RELEASE and WAIVER

In consideration of my participation in Event, I hereby, for myself, my heirs, executors, administrators, assigns, or any others who may claim on my behalf, covenant not to sue, and hereby waive, release, and discharge the Releasees from any and all claims of liability for personal injury, illness, loss of life or property damage of any kind or nature, arising out of or sustained in the course of my participation in the Event. This Release and Waiver applies to all claims, foreseen and unforeseen, including negligence and breach of statutory or other duties of care, including those that may be owed under the *Municipal Act, 2001* and the *Occupiers’ Liability Act*.

PANDEMIC OR OUTBREAK OF COMMUNICABLE DISEASE

In the event any government orders are issued by the Province of Ontario in relation to any pandemic or outbreak of any communicable disease, the Town shall have the right to cancel the Event and terminate this Agreement without any liability to the Participant and without any compensation to the Participant.

Before, after and during the Event, the Participant shall abide by and ensure its staff and/or volunteers abide by any health and safety recommendations, or protocols put in place by any level of government in relation to any pandemic or outbreak of a communicable disease.



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INSURANCE

In consideration of my participation in the Event, I hereby agree to provide a Commercial General Liability Insurance Certificate to the Town as set out below:

1. Commercial General Liability insurance in an amount not less than Two-Million Canadian Dollars (\$2,000,000.00 CAD) per occurrence, naming "The Corporation of The Town of Aurora" as an additional insured. Such insurance shall contain a cross liability and severability of interest clause and shall include, but not be limited to, bodily injury including death, personal injury, property damage, including loss of use thereof, blanket contractual liability, Owner's and Contractor's protective liability, contingent employer's liability, non-owned automobile liability, and products and completed operations coverage.

INDEMNITY AGREEMENT

In consideration of my participation in the Event, I agree to hold harmless, indemnify and defend the Releasees from and against any and all liability, loss, claims, actions, causes of action, demands, costs and expenses, including reasonable legal expenses, which may be brought against or made upon the Releasees due to any personal injury or property damage to myself or any third party arising from my actions or the actions of my staff and/or volunteers in relation to the Event.

PERMISSION TO PHOTOGRAPH AND RECORD

The parties agree that the Town may take photographs and make audio and video recordings ("Recordings") of my, or my organization's participation in the Event, which may include photographs and/or Recordings of me, my staff and/or volunteers which may be published in the Town's media publications, including social media channels. I hereby consent to the use of such photographs and Recordings by the Town and hereby release the Town from any copyright claims in relation to same.

I recognize that by signing this document I am waiving certain legal rights, including the right to sue.

Name of Participant: _____

Address of Participant: _____

Signature of Participant: _____

Date: _____