

The Windsor Residence for Young Men

COLDEST NIGHT OUT

When:

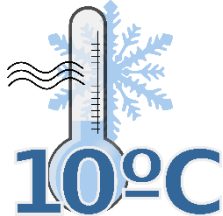
Friday, February 22, 2019 @ 5:00PM

until

Saturday, February 23, 2019 @ 7:00AM

Location:

**1350 St. Luke Road
Windsor, ON N8Y 3N2**



"How does it feel ... to be on your own ... like a rolling stone?" – Bob Dylan

The Rules: (Please read carefully)

1. You can only rely on what you can carry on your back.
2. You are only allowed \$18 per day to meet all your needs, (just like our guys); and, proceeds of "panhandling" as well as sponsorship goes to WRYM.
3. You are allowed only ½ hour "off the lot" every 3 hours in rotation to meet your needs.
4. You confirm that you are in proper physical and emotional condition to participate.
5. You understand all inherent risks in participating and assume all risks for personal safety; and that, you can stop your participation at any time and will if requested to do so.
6. In consideration of acceptance to participate in this event, you hereby for yourself, your heirs, executors, administrators, successors and assigns waive any claims to which you may become entitled for injury or damage or other liability regardless of cause and release The Windsor Residence for Young Men, Dave Woodall and Medachrom Holdings Limited, the venue property, sponsors and all their employees or volunteers assisting in this event from any claims for damages or injury suffered by you as a result of your participation in or travelling to or from this event.
7. You give permission to use your name and image in any type of media account of this event.
8. You will check in on site at 1350 St. Luke Road, Windsor, Ontario, by submitting this form, fully completed, as well as the pledge sheet(s) and funds collected to date.
9. You will check out with the site supervisor when you leave the site for any reason or at the end of the event.

I **accept** the terms of my participation in this event, **Coldest Night Out**, as stated above.

Signature: _____ Date: _____

Name (please print): _____

Suite/Apt: _____ Street: _____ Province: _____ Postal Code: _____

Phone: _____ Email: _____