

ELIGIBILITY & LIABILITY/PUBLICITY RELEASE

Read this form carefully before completing and signing. In order to confirm your eligibility:

- 1. This document must be completed, signed, and received via email at **beyond@outfitterfinancial.ca** by 8:59:59 am ET on July 16, 2024.
- 2. You must provide Proof of Age (via a photocopy or image of Driver's License, or other document that proves date of birth) and send via email to **beyond@outfitterfinancial.ca**, to be received by 8:59:59 am ET on July 16, 2024. Note that, at some point in 2024 (no later than December 31, 2024) the winner must be at least 18 years of age, and by December 31, 2024 no older than 21 years of age.
- 3. You must provide proof of Enrolment/Attendance at a post-secondary institution and send via email to **beyond@outfitterfinancial.ca**, to be received by 8:59:59 am ET on July 16, 2024.
- 4. You must correctly answer the skill testing question on page two of this document.

I hereby represent that I am a resident of the Province of ONTARIO. I am submitting this with the understanding that it will be relied upon to determine my eligibility in the Competition. I affirm and represent that I have complied with all the rules and regulations of the Competition and that I have committed no fraud or deception in entering the Competition or in claiming any prize. I represent that I have obtained my materials through authorized, legitimate channels. I further represent that I am not an employee of the Sponsor or of any other entity stated in the official rules whose employees are not eligible to enter the Competition or a member of the family or household of any such employee or agent. I understand that I am entitled to receive only the announced prize and that prizes are non-transferable, and no substitutions will be made except at the sole discretion of the Sponsor or as provided in the Contest Rules. I hereby give my consent to the Sponsor and the promotion agency for the use of my name, address (excluding street and postal code), and submitted materials (essay and video), and may use photographs or recordings of me, without further obligation to me, in any and all advertising and promotional materials relating to the Competition and similar competition which may be offered by the Sponsor in any and all media, including on the Internet, without territorial, time, use or other limitations. I understand and acknowledge and hereby, for myself, my heirs, executors and administrators, do waive and release any and all rights, claims and causes of action whatsoever I may have against the promotion agency and the Sponsor for any matter, cause of things whatsoever arising out of my acceptance and utilization of the prize that I have won in the Competition. I also acknowledge that I am solely responsible for all federal, provincial, and local taxes due as a winner of this Competition. I recognize that I may wish to seek independent counsel to determine the full extent of my tax liability under federal and provincial laws and regulations. I acknowledge and agree that I am responsible for all other expenses that may become due because of my winning the prize. I hereby agree that Sponsor and Agency have neither made nor are in any manner responsible or liable for any warranty, representation, or guarantee, expressed or implied, in fact or in law, relative to any prize including but not limited to its quality, merchantability, fitness for a particular purpose or mechanical condition. I agree to return immediately upon demand to the Sponsor any prize or the value of said prize that has been or may be awarded to me if any statement made by me in this affidavit is false. I warrant and represent that on December 31, 2024 I will be at least 18 years of age and no older than 21 years of age. I declare that all information I submit in this release is true and correct. I attest that I have read, or have had read to me, and understand all the foregoing provisions of this release, prior to its execution, and agree to bound by them.



Skill testing question:

(15 x 3) – (25 ÷ 5) =	
FULL LEGAL NAME	
ADDRESS	
CITY, PROVINCE	POSTAL CODE
CELL PHONE	HOME PHONE
SOCIAL INSURANCE NUMBER	DATE OF BIRTH

SCHOOL NAME ENROLLED AT / ATTENDING (University, College or Trade School in the Province of Ontario)

ATTENTION: To be valid, this Release MUST BE SIGNED AND DATED BY A WITNESS.

Witness Signature

Date: _____

Student Signature (must sign in front of the Witness)

Signed in the city of: _____

Date: _____