

From May 1 to May 31

**you've been
CHALLENGED!**

———— in support of ————
#TJFChairAware

TEAMJIGGER.COM





Team Jigger Foundation
 Bay #1 6140 Hwy 2A
 Lacombe, AB
 825.640.TEAM (8326)
admin@teamjigger.com

REGISTRATION FORM

May 1 – May 31, 2025

Thank-you for your interest in registering as a participant in the *Team Jigger Foundation's Chair Aware* event, in partnership with MNP. Your participation is appreciated, and we hope your experience helps to make you aware of the challenges faced by the disabled on a daily basis.

Team Lead, please complete the following registration in full and return to admin@teamjigger.com as soon as you are able, to secure your spot. Please note that due to the limited number of wheelchairs available, registration will be ***processed on a first-come, first-serve basis.***

NAME:		COMPANY:	
PH:		CELL:	
EMAIL:			
ADDRESS:		CITY:	
Participant #2 Name:		PH:	
Participant #3 Name:		PH:	
Participant #4 Name:		PH:	
PREFERRED DATES OF PARTICIPATION:			
SECONDARY DATES PREFERENCE: (if applicable)			
MY PREFERRED WHEELCHAIR PICK UP AND DROP OFF LOCATION IS: (check one)		D&M Landscape Depot 5642 Wolf Creek Dr, LACOMBE, AB	
		MNP Red Deer 4311 54 Ave #400, RED DEER, AB	
		The Lending Cupboard 7803 Gaetz Ave E #1, Red Deer	

ACKNOWLEDGMENTS:

I HAVE READ AND UNDERSTAND THE EVENT RULES AND REGULATIONS: (circle)	Yes	No
I HAVE READ AND UNDERSTAND THE ONLINE FUNDRAISING PROCESS: (circle)	Yes	No
I CONFIRM THAT I AM AT LEAST 18 YEARS OLD AT DATE OF PARTICIPATION: (circle)	Yes	No
I GRANT PERMISSION TO BE PHOTOGRAPHED FOR MARKETING PURPOSES: (circle)	Yes	No
I HAVE READ, UNDERSTOOD AND SIGNED THE WAIVER OF LIABILITY: (circle)	Yes	No

I hereby submit my registration for the Team Jigger Foundation Chair Aware Event

Signature

Date

Team Jigger Foundation Office Use Only

Notes:

<i>Received</i>	<i>Processed</i>	<i>Assigned</i>	<i>Other</i>

Chair Aware 2025

Thank you for your interest and participation in this year's Chair Aware event! Please find a few task suggestions below, to help get the most out of your chair experience!

Tasks

- Grab some coffee (or your beverage of choice)!
 - o *The Broom Tree Foundation in Lacombe makes a great latte! 😊*
- Visit your local grocery store and pick up a few items that can be donated to the local food bank!
 - o *Lionel's No Frills and Lacombe Co-op offer pre-packaged foodbank baskets to make it even simpler! Drop the donation at the specified drop-off location in-store, or back at your Chair Drop off location!*
- Head out for lunch at your favorite local restaurant or cafe
- Visit your bank
- Try making some copies at your office photocopier
- Take a stroll outside on your break
- Fuel up a vehicle with gas

Timeline & Tasks

The following timeline is based on a team of four. If you have less in your team, allocate the challenges accordingly. If you are able, please take photos of you/your team completing these tasks and share them with **@TeamJigger** on social media, email **admin@teamjigger.com** or use the hashtag **#TJFChairAware**.

1. FIRST (morning ~8:30a-10:30a)
 - Pick-up your chair at the specified location
2. SECOND (late morning ~10:30a-12:30p)
3. THIRD (noon ~12:30p-2:30p)
4. FOURTH (afternoon ~2:30p-4:30p)
 - Drop off chair at the specified location

Participation Rules

This year we are promoting a team-style event where a team of *up to four* individuals spend a portion of the day in a wheelchair. To encourage some good old-fashioned, friendly competition, we challenge each team to completing a few tasks (list will be provided with chair pickup).

The purpose of this year's event is threefold;

First, to allow able bodied individuals to experience the hurdles faced by the mobility challenged in a way that generates awareness and understanding.

Second, to extend the reach of accessibility awareness throughout our community by collaborating with other local non-profit organisations.

And thirdly, to utilize the experience and your existing social and work networks to solicit donations for the Team Jigger Foundation to purchase new equipment designed to aid in mobility recovery.

We are thrilled to collaborate with the Broom Tree Foundation, Big Brothers Big Sisters Lacombe, The Lacombe and District Family and Community Support Services, and the Lacombe Foodbank to spread even greater awareness for accessibility in our community.

Before submitting your registration form, please read the following rules for the 2025 Chair Aware event.

RULES

1. Please take note of your chair pick up and drop off time and location. Teams are responsible for chair exchange throughout the day. Adherence to these timelines and sites is key to keeping the campaign running smoothly throughout the week, and your assistance in keeping it that way is greatly appreciated. If unsure, please ask!
2. Your chair will be sanitized prior to pick up.
3. Please take care of your provided wheelchair. It is on loan for this event specifically and if lost, stolen or damaged, may mean it is not available for someone who needs it afterwards.
4. You are asked to remain in your chair, within reason, for the duration of your experience on your participation day. It is suggested that you take a few moments early on to learn how to operate your manual chair, and to adjust supports as required.
5. Please attempt to remain in your chair for the allotted timeframe. Only leave your chair to use the washroom, to safely operate your vehicle, or if you are absolutely unable to maneuver the chair safely. Keep the chair near you at all times.

6. During the course of the event, do not engage in any unsafe activity. Attempting to maneuver your chair in a way that is harmful to yourself or others is not permitted, nor is willfully engaging in activities that may damage or make the chair unusable.

7. As an able-bodied participant, please be aware of your privilege. Do not abuse or misuse resources (such as handicapped parking stalls or accessible building features) that are being used, or are meant to be used, by the mobility challenged. Your experience is an important component of the campaign, but is not to be used to the detriment of those in actual need.

8. Please do not use this campaign as a platform to point out, embarrass, denigrate or shame any business, residence, municipality or service that may not be as barrier free as you would have liked. Instead, consider how these barriers may be experienced by someone with a mobility challenge and how you may be able to help find solutions. Share your observations with event organizers post-campaign to see how we may be able to address identified needs.

9. Please feel free to document or share your experience on social media using the hashtag **#TJFChairAware**. Remember that, as an awareness campaign, it may be easier to experience the negative over the positive, but please refrain from publicly airing negativity (as outlined above). Please consider whether it is necessary to include a business' name in your post, or rather a close-up of the barrier you may have experienced.

10. Please do not misrepresent yourself as mobility challenged to anyone, especially to those who are unaware of the campaign. Utilize the quick notes (provided) to describe what it is you are doing, and spread awareness to those you meet during your day.

11. While soliciting fundraising dollars, refer to the 'How To' document provided with your registration package for instructions on how to use your personal QR code

12. A Team Jigger Support Team will be available from 8 am to 4:30pm May 1st – May 31st to aid with any questions you may have, or to troubleshoot any problems you may encounter. When in doubt, do not hesitate to reach out for guidance.

Finally, there is no 'proper' way to experience this event. You may feel excited, embarrassed, scared, happy, emphatic, discouraged, overwhelmed or determined. How you experience this awareness campaign is unique and correct for you. However, when sharing your experience, or upon reflection of your time in the chair, please remember: your 8 hour, one-day participation is a 24-hour, 365-day-a-year experience for a paraplegic, quadriplegic or similarly mobility challenged person.

Thank-you for your consideration of those individuals, who have their own varied and emotional experiences with their day to day lives.

And thank-you for undertaking this commitment to the Team Jigger Foundation. Together, everyBODY Achieves More, and we could not do it without your support!

- The Team Jigger Foundation



The Team Jigger Foundation of Lacombe, Alberta

WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

1. In consideration for receiving permission to participate in all Team Jigger Foundation events, I hereby RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE the Team Jigger Foundation, the Board of Directors of the Team Jigger Foundation, their officers, agents, event sponsors, event partners or employees (hereinafter referred to as RELEASEES) from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, any members of my team, or to any property belonging to us, while participating in such activity, while in, on or upon the premises where the activities are being conducted, REGARDLESS OF WHETHER SUCH LOSS IS CAUSED BY THE NEGLIGENCE OF THE RELEASEES, or otherwise and regardless of whether such liability arises in tort, contract, strict liability, or otherwise, to the fullest extent allowed by law.
2. I am fully aware of the risks and hazards connected with the activities of all Team Jigger Foundation events and I am aware that such activities include the risk of injury and even death, and I hereby elect to voluntarily participate in said activities, knowing that the activities may be hazardous to my property and me. I understand that the Team Jigger Foundation does not require me to participate in activities. I voluntarily assume full responsibility for any risks of loss, property damage, or personal injury, including death, that may be sustained by me, or any loss or damage to property owned by me, as a result of being engaged in such an activity, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES or otherwise, to the fullest extent allowed by law.
3. I further hereby AGREE TO INDEMNIFY AND HOLD HARMLESS the RELEASEES from any loss, liability, damage, or costs, including court costs and attorneys' fees that Releases may incur due to my participation in said activities, WHETHER CAUSED BY NEGLIGENCE OF RELEASEES or otherwise, to the fullest extent allowed by law.
4. It is my express intent that this Waiver and Hold Harmless Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE, AND COVENANT NOT TO SUE the above-named RELEASEES. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the Province of Alberta and that any mediation, suit, or other proceeding must be filed or entered into only in Alberta courts. Any portion of this document deemed unlawful or unenforceable is severable and shall be stricken without any effect on the enforceability of the remaining provisions.

BY SIGNING BELOW, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Wavier of Liability and Hold Harmless Agreement, understand it and sign it voluntarily as my own free act and deed and for all my family members; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this Agreement for full, adequate and complete consideration fully intending to be bound by same.

Signed this ____ day of _____, 2025. x _____

PRINT NAME: _____