Event Waiver

FORCE AND EFFECT. Initial___

Name:		Todays Date/
Address:	State:	Zip:
Phone	Email:	
Event:		
Emergency Contact Name:		Phone
RELEASE AND WAIVER OF LIABILITY, ASS	SUMPTION OF RISK, AND I	INDEMNITY AGREEMENT
IN CONSIDERATION of being permitted to pa ("Activity") I, for myself, my personal represen	• • • • •	
1. ACKNOWLEDGE, agree, and represent that in good health, and in proper physical condition will be conducted over public roads and facilitit travelling are to be expected. I further agree a immediately discontinue further participation in	on to participate in such Activites open to the public during and warrant that if at any time	rity. I further acknowledge that the Activity the Activity and upon which the hazards of I believe conditions to be unsafe, I will
2. FULLY UNDERSTAND that: (a) BICYCLING INJURY, INCLUDING PERMANENT DISABIL may be caused by my own actions, or inaction condition in which the Activity takes place, or may be OTHER RISKS AND SOCIAL AND ECT this time; and I FULLY ACCEPT AND ASSUM COSTS, AND DAMAGES I incur as a result of	ITY, PARALYSIS AND DEAT ns, the actions or inactions of THE NEGLIGENCE OF THE CONOMIC LOSSES either no TE ALL SUCH RISKS AND A	TH ("RISKS"); (b) these Risks and dangers fothers participating in the Activity, the E"RELEASEES" NAMED BELOW; (c) the not known to me or not readily foreseeable ALL RESPONSIBILITY FOR LOSSES,
3. HEREBY RELEASE, DISCHARGE, AND C administrators, directors, agents, officers, mer advertisers, and, if applicable, owners and les one of the "RELEASEES" herein) FROM ALL ACCOUNT CAUSED OR ALLEGED TO BE C "RELEASEES" OR OTHERWISE, INCLUDING if, despite this RELEASE AND WAIVER OF LI or anyone on my behalf, makes a claim against HARMLESS EACH OF THE RELEASEES fro which any may incur as the result of such claim	mbers, volunteers, and emplosors of premises on which the LIABILITY, CLAIMS, DEMANDAUSED IN WHOLE OR IN FIGURE OF INTERNATION OF IABILITY, ASSUMPTION OF st any of the Releasees, I Will many litigation expenses, at	oyees, other participants, any sponsors, ne Activity takes place, (each considered NDS, LOSSES, OR DAMAGES ON MY PART BY THE NEGLIGENCE OF THE PERATIONS; AND I FURTHER AGREE the RISK, AND INDEMNITY AGREEMENT I
I HAVE READ THIS AGREEMENT, FULLY UN SUBSTANTIAL RIGHTS BY SIGNING IT, AND ASSURANCE OF ANY NATURE AND INTEN	D HAVE SIGNED IT FREELY	AND WITHOUT ANY INDUCEMENT OF

LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL

Signature of Entrant:	Date:/
Print Name:	Age:
CONSENT AND RELEASE OF	PARENT OR LEGAL GUARDIAN
participation. I have read and understand the above controlled consent to the contract and agree that its terms shall likewand assignees. I hereby release and shall defend, indemnany liability that I or my Child may allege against the Release or indirect result of injury or death to me or my Child becarby the negligence of the releasees or others to the maxim	vise bind me, my child, and our heirs, legal representatives, nify and hold harmless the releasees from every claim and asees (including reasonable legal fees and costs) as a direct use of my Child's participation in the event, Whether caused

I attest that I am eighteen (18) years of age or older (or that if I am younger, my parents or legal guardian have

with the program or events and my participation is such program or events is voluntary.

or Legal Guardian_____

Signature of Parent

executed this waiver below), and that I am physically fit and sufficiently trained to participate in all activities associated