



Ride to Remember 2005

Membership Registration

Name _____

Address _____

City _____ **State** _____ **Zip** _____

Telephone (home) () _____ **(work)** () _____

E-mail _____

Age _____

Jersey Size _____ **Shorts Size** _____

Emergency Contact _____ **Tel #** _____

Administrative Use Only

Fee Paid _____

Check# _____

Waiver Signed _____

ALL PARTICIPANTS MUST READ AND SIGN THE WAIVER BELOW

I acknowledge that cycling is an extreme test of a person's physical and mental limits and carries with it the potential for property loss, serious injury, and death. I HEREBY ASSUME THE RISKS OF PARTICIPATING IN RIDE TO REMEMBER and its related events. I certify that I am in good health and have NOT been advised to avoid physical activity by a medical professional. I acknowledge that my participation in this program is entirely voluntary.

In consideration for allowing me to participate in Ride to Remember, I hereby take the following action for myself, my executors, administrators, heirs, next of kin, successors, and assigns: 1) I WAIVE, RELEASE, AND DISCHARGE from any and all claims or liabilities for death, personal injury, property damage or loss, theft, or damages of any kind which arise out of or relate to my participation in, or my travelling to or from a group activity THE FOLLOWING PERSONS OR ENTITIES: the officers and/or directors, organizers, participants, representatives, volunteers, or agents of Ride to Remember or its sponsors, all states, cities, counties, or localities in which the group holds functions or activities as well as , the officers and/or directors, organizers, participants, representatives, volunteers, or agents of any of the above; 2) I AGREE NOT TO SUE any of the persons or entities mentioned above for any of the claims, liabilities that I have waived, released, or discharged herein; and 3) indemnify and hold harmless the persons or entities mentioned above from any claims or liabilities assessed against them as a result of my actions during an organized group activity or function.

I HEREBY AFFIRM THAT I AM AT LEAST EIGHTEEN (18) YEARS OF AGE OR OLDER, I HAVE READ THIS DOCUMENT, AND I UNDERSTAND ITS CONTENTS.

Printed Name _____

Signature _____ **Date** _____

REMEMBER: NO HELMET, NO WAIVER: NO RIDE