

Waiver and Release Form for 2019 Corporate Cycling Challenge

Complete/Sign this form and return to your Club Captain. Every rider must complete a Waiver.

Club Name: _____
(Please Print)

First Name: _____
(Please Print)

Last Name: _____
(Please Print)

Age ____ (if under 19 yrs old, a parent/guardian must sign at bottom.)

Home Address: _____

City/State/Zip: _____

Phone: _____

E-Mail Address: _____

T-Shirt: S ____ M ____ L ____ XL ____ XXL ____

Route: ____ Olde River Ride – 10 Mi.
 ____ Riverside Ride – 25 Mi.
 ____ Tour de Fort - 42 Mi.

In consideration of the acceptance for entry in the above event, I hereby freely agree to and make the following contractual representations and agreements:

I agree to wear a helmet while riding in this event.

I fully realize the dangers of participating in a bicycle event and fully assume the risks associated with such participation including by way of example: the dangers of collision with pedestrians, vehicles, other participants and fixed or moving objects; the dangers arising from surface hazards, equipment failure, inadequate safety equipment and weather conditions; and the possibility of serious physical and/or mental trauma or injury associated with the Corporate Cycling Challenge.

I hereby waive, release and discharge for myself, my heirs, executors, administrators, legal representative, assigns, and successors in interest (hereinafter collectively "successors") any and all rights which I have or which may hereafter accrue to me against the sponsors of this event, the Eastern Nebraska Trails Network, and any promoting organization(s), property owners, law enforcement agencies, all public entities, special districts, and properties (and their respective agents, officials, and employees), through or by which the events will be held for any and all damages which may be sustained by me directly or indirectly in connection with the event, or travel to or return from the event.

I agree it is my sole responsibility to be familiar with the event course, and any special rules and regulations of the event. I understand and agree that situations may arise during the event which may be beyond the immediate control of the event officials or organizers, and I must continually ride so as to neither endanger myself nor others. I accept responsibility for the condition and adequacy of my equipment. I will wear a helmet which can protect against serious head injury, and assume all responsibility and liability for the selection of such a helmet. I have no physical or medical condition which, to my knowledge, would endanger myself or others if I participate in this event, or would interfere with my ability to participate in this event. I agree, for myself and successors, that the above representations are contractually binding, and are not mere recitals, and that should I or my successors assert my claim in contravention of this agreement, I or my successors shall be liable for the expenses (including legal fees) incurred by the other party or parties in defending, unless the other party or parties are finally judged liable on such claim for willful and wanton negligence. This agreement may not be modified orally, and a waiver of any provision shall not be construed as a modification of any other provision herein or as consent to any other provision herein or as consent to any subsequent waiver or modification.

Signature: _____

Date: _____

Parent or Guardian of a Minor:

I as a parent or guardian of the above named minor hereby give my permission for my child or ward to participate in the event, and further agree, individually and on behalf of my child or ward, to the terms of the above.

(Parent / Guardian)

DATE: _____