

# Outreach for Hope Family Bike Ride

Saturday, September 9, 2017

## REGISTRATION FORM

www.outreachforhope.org



**PLEASE PRINT**

Ride		T-Shirt Size	
(Select One)		Adult	Child
Road 20, 30, 50	Trail	S, M, L, XL, XXL	M, L

<b>ADULT #1</b> (18+)	Name	Age				
	Street	E-Mail				
	<b>and/or</b>	City, State, Zip	Phone			
	<b>FAMILY LEADER</b>	Emergency Contact Name	ER Phone			
Home Congregation		City				
<b>ADULT #2</b> (18+)	Name	Age				
	E-Mail	Phone				
	Emergency Contact Name	ER Phone				
<b>CHILD #1</b> ( <b>&lt;18</b> )	Name	Age				
	Emergency Contact Name	ER Phone				
<b>CHILD #2</b> ( <b>&lt;18</b> )	Name	Age				
	Emergency Contact Name	ER Phone				
<b>CHILD #3</b> ( <b>&lt;18</b> )	Name	Age				
	Emergency Contact Name	ER Phone				
<b>CHILD #4</b> ( <b>&lt;18</b> )	Name	Age				
	Emergency Contact Name	ER Phone				

Registration Summary	#		Reg. Fee		Total
Number of Adults		x	\$35.00	=	\$
Number of Children		x	\$25.00	=	\$
OR					
Family # Adults _____ # Children _____	1	x	\$70.00	=	\$
TOTAL DUE					\$

Make checks payable to: **Outreach for Hope, Inc.**

Mail Registration Form, Release and Waiver of Liability Agreement **for each rider**, and Fees to:

**Dave Hammer, 1480 Fairways Circle, Oconomowoc, WI 53066**

Signature of Responsible Party:

Registration before August 20, 2017 is requested to assure receiving event T-Shirt.



## BIKE RIDERS RELEASE AND WAIVER OF LIABILITY AGREEMENT

I acknowledge and understand that bicycling is an action sport carrying significant risk of serious personal injury, death or property damage. I also acknowledge and understand that there are natural, mechanical and environmental conditions and risks which independently or in combination with my activities may cause severe or even fatal injuries to me or others. I acknowledge that the trail route for the Outreach For Hope Family Bike Ride travels the paved Glacial Drumlin Bike Trail which crosses several roads also used by motorized vehicles; and the road rides are on village, county and state roads which are used by motorized vehicles, the dangers of which are acknowledged and expected.

In spite of these known and understood dangers, I agree to accept all responsibility for the risks, conditions and hazards that may occur whether they now be known or unknown. I agree that I alone am responsible for: (a) my safety while participating in The Outreach for Hope Family Fun Ride and/or training for this event and, (b) providing, utilizing and maintaining that equipment necessary for the safe enjoyment of my participation in this event. I specifically acknowledge that Outreach for Hope, Inc., its staff, volunteers, agents, cooperating organizations, and/or sponsors are not responsible for my safety. In recognition of the above, I agree to **RELEASE** and **WAIVE** any and all claims of negligence against Outreach for Hope, Inc., its staff, volunteers, agents, cooperating organizations, sponsors, and any other entities or individuals connected with this event in any way. Notwithstanding the above, this is not a release and waiver of intentional or reckless acts.

Further, I agree to forever **HOLD HARMLESS** and **INDEMNIFY** all persons and entities identified above associated with Outreach For Hope, Inc., generally and specifically, from any and all liability, claims of negligence, harm, loss, or damages suffered or sustained as a result of my participation in Outreach For Hope Family Bike Ride. This Release, Waiver, Hold Harmless, and Indemnification Agreement shall apply to my own claims and/or the claims of third parties relating to my participation in this event, and shall be binding upon my heirs and assigns.

I have read this agreement, fully understand that I have given up substantial rights by signing it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional **RELEASE and WAIVER of LIABILITY**, within its terms, to the greatest extent allowed by law. I acknowledge having read and agreed to the terms of this **RELEASE and WAIVER of LIABILITY**. I acknowledge and agree that if the terms of this agreement are not acceptable, I have the choice and option to forego participation in this voluntary event.

Name (Please Print)	
SIGN HERE	Date

(If participant is less than 18 years of age, then the parent or legal guardian must sign below.)

This is to certify that, as parent/guardian of this participant, I do consent to his/her agreement to be bound by the above Release and Waiver of Liability Agreement

Parent/Guardian Signature	Date
Parent/Guardian Name (Please Print)	Relationship