

SUNDAY IN JUNE ADULT (18 & Over) with MINORS - REGISTRATION FORM

REGISTRATION WILL BE PROCESSED UPON RECEIPT OF COMPLETED REGISTRATION FORM, FULL FEE PAYMENT, AND LIABILITY WAIVER IS DATED/SIGNED.

PLEASE PRINT LEGIBLY- FOR YOUR SAFETY!

ONE FORM PER ADULT RIDER - NO EXCEPTIONS!

1 PARENT/GUARDIAN/RIDER IDENTIFICATION, AND EMERGENCY PHONE CONTACT

LAST NAME

FIRST NAME

BIRTH DATE(DD-MM-YY)

EMAIL ADDRESS (Please Print Legibly)

YOUR MOBILE PHONE—ON RIDE

EMERGENCY PHONE — ON RIDE or NOT

FULL NAME OF EMERGENCY PHONE CONTACT—ON RIDE or NOT

2 YOUR RIDE DISTANCE and WRISTBAND COLOR (Adult Must Ride w/ Minors) - CHECK ONE BOX ONLY

26 mi Yellow Band
 40 mi Blue Band
 66 mi Green Band
 102 mi Orange Band

3 ADULT/PARENT/GUARDIAN RIDER FEES - CHECK ONE BOX ONLY

One (1) \$40.00—Adult Public
 One (1) \$35.00 CTC Adult Member

4 MINOR RIDER(S) FEE(S) - ALL RIDERS UNDER 15 YEARS OF AGE ADMITTED FREE!

___ Total Number of Minor Riders 15 thru 17 years old X \$40/each = \$ ____ .00
 (SEE PAGE 3 — ENTER TOTAL FROM STEP 3 HERE, and CALCULATE TOTAL FEES AT STEP 5 BELOW)

5 TOTAL FEES: Item #3 \$ ____ .00 + Item #4 \$ ____ .00 = \$ ____ .00

(PAY BY CREDIT/DEBIT CARD, CASH, or CHECK (payable to Cleveland Touring Club, LLC) at CHECKOUT)

**Release and Waiver of Liability, Assumption of Risk, Indemnity, and Parental Consent Agreement
 (“Agreement”) for Cleveland Touring Club, Bicycling Club
 Fully Paid Member of League of American Bicyclists (“LAB”)**

(This form to be used only for Individual Adults with Minors)

IN CONSIDERATION of being permitted to participate in any way in CLEVELAND TOURING CLUB, LLC sponsored Bicycling Activities including **Sunday in June**, I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of Bicycling Activities and that I am qualified, in good health and in proper physical condition to participate in such Activity. I further acknowledge that the Activity will be conducted over public roads and facilities open to the public during the Activity and upon which the hazards of traveling are to be expected. I further agree and warrant that if, at any time, I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.

2. FULLY UNDERSTAND that (a) BICYCLING ACTIVITIES INVOLVE RISK AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH (“Risks”); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the conditions in which the Activity takes place, or THE NEGLIGENCE OF THE ‘RELEASEES” NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I may incur as a result of my participation in the Activity.

3. HEREBY RELEASE, DISCHARGE AND COVENANT NOT TO SUE the Cleveland Touring Club, the LAB, its respective administrators, directors, agents, officers, members, volunteers and employees, other participants, any sponsors, advertisers, and, if applicable, owners, and lessors of premises on which the Activity takes place (each considered one of the “RELEASEES” herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE “RELEASEES” OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS. And, I FURTHER AGREE that is, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

I AM 18 YEARS OF AGE OR OLDER, HAVE READ AND UNDERSTAND THE TERMS OF THIS AGREEMENT, UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING THIS AGREEMENT, HAVE SIGNED IT VOLUNTARILY AND WITHOUT INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW. I AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING SHALL CONTINUE IN FULL FORCE AND EFFECT.

MINOR RELEASE

(List ALL Participants Under the Age of 18 on Form Back Side - Page 3)

AND I, THE MINOR’S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF BICYCLING ACTIVITIES AND THE MINOR’S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE AND COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR’S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE “RELEASEES” OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR’S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

PARENT/GUARDIAN NAME (PRINTED): _____

PARENT/GUARDIAN SIGNATURE: _____ I HAVE READ THIS RELEASE

(Only if participant is under the age of 18)

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Step 1: List ALL Minor Riders under age 18 in below table

Step 2: Enter each minor's current age in AGE column

Step 3: Count up Minors 15 thru 17 years of age, and WRITE TOTAL HERE: _____, and then Enter Count on Page 1 at Circled Item No. 4

| FIRST NAME | LAST NAME | BIRTH DATE (mm/dd/yyyy) | AGE |
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ALL RIDERS UNDER 15 YEARS OF AGE ADMITTED FREE!