

2008 Tour de Trykes Registration Form

ENTRY BLANK Return completed entry with checks made payable to:

Enid Noon AMBICS
Tour de Trykes
P.O. Box 406
Enid, OK 73702

PLEASE PRINT Please complete one entry for each participant.

NAME _____

EARLY REGISTRATION:

ADDRESS: _____

Single bike \$22 ___ 2 mile Fun Ride \$15 ___ indiv.

CITY _____ ST _____ ZIP _____

Tandem \$40 ___ \$30___ family

Email address _____

I WILL RIDE THE 10__ 22__ 38__ 58__ 100__ MILE ROUTE Check t-shirt size: S__ M__ L__ XL__

WAIVER OF RESPONSIBILITY: THIS ENTRY BLANK AND RELEASE FORM IS A CONTRACT WITH LEGAL CONSEQUENCES. READ IT THOROUGHLY BEFORE SIGNING.

In consideration of the acceptance for entry in the Tour De Trykes, I hereby freely agree to and make the following contractual representations and agreements: I fully realize the dangers of participating in a bicycle ride and fully assume the risks associated with such participation including, by example, and not limited to the following dangers of collision, pedestrians, vehicles, other riders, 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 athletic cycling events. I hereby waive, release and discharge for myself, my heirs, executors, administrators, legal representatives, assigns and successors in interest (hereinafter collectively "successors") any and all rights and claims that I have or that may hereafter accrue to me against the sponsors of this event, the organizers and any promoting organization(s), property owners, law enforcement agencies, all public entities, special districts, and properties (and other 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, or arising out of, my participation in or association with the event, or in traveling to or from the event.

I agree it is my sole responsibility to be familiar with the ride course and special regulations for the event. I understand and agree that situations may arise during the ride that may be beyond immediate control of the ride officials or organizers and I must continually ride so as to neither endanger myself nor others. I accept the responsibility for the condition and adequacy of my equipment. I will wear a helmet certified by ANSI Z904 or SNELL performance tests and that 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 successor assert my claim in contravention of the 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 adjudged 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 a consent to any other provision herein or as consent to any subsequent waiver for modification.

RIDER'S SIGNATURE
(Must be at least 18 years of age)

DATE

IF RIDER IS UNDER AGE OF 18, PARENT
OR GUARDIAN MUST SIGN

DATE

I, as 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 waiver of responsibility.