

Cash  Credit  Check # \_\_\_\_\_



**44<sup>TH</sup> SIERRA CENTURY  
DAY OF EVENT REGISTRATION**

**RIDER INFORMATION**

First Name:		Last Name:	
E-mail Address:			Phone:
Street Address:	City:	State:	ZIP:
Gender: <input type="checkbox"/> M <input type="checkbox"/> F	Age:		
Emergency Contact Information	Name:	Phone Number:	

**ROUTE OPTIONS: ( THE FEE FOR ALL ROUTES IS \$85)**

<input type="checkbox"/> <b>Half Century</b>	<input type="checkbox"/> <b>Metric Century</b> 65 mi 5000 ft
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**ACCIDENT WAIVER AND RELEASE OF LIABILITY**

IN CONSIDERATION of being permitted to participate in any way in this Sacramento Wheelmen Cycling Club (Club) sponsored Bicycling Activity (Activity), I for myself, my personal representative, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree and represent that I understand the nature of cycling activities and that I am qualified, in good health, and in proper physical condition to participate in such Activities. 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 acknowledge 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 and possible death (risks); (b) these risks and dangers may be caused by my own actions, or inactions, the actions of others participating in Activity, the conditions in which Activity takes place, or the negligence of the releasee 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 responsibility for losses, costs and damages I incur as a result of my participation in the activity.

3. HEREBY RELEASE, DISCHARGE, CONVEY, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS the Club, their respective administrators, directors, agents, officers, employees and volunteers, other participants, any sponsors, advertisers, and if applicable, owners and lessors of the 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 others, including negligent rescue operations. I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, I, or anyone on my behalf, make a claim against any of the Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, losses, liability, damages, or costs which any may incur as the result of such claim.

**I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND WITHOUT ANY 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 THE AGREEMENT IS HELD INVALID, THE BALANCE, NOT WITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.**

Participant : \_\_\_\_\_  
SIGNATURE Date

If under 18 years old, a parent or guardian must sign below.

Parent or Guardian : \_\_\_\_\_  
SIGNATURE Date