



REGISTRATION FORM

Saturday, August 15, 2009

Cycle to Serve

2009

Bike Ride



One form per rider – please print legibly

Name: _____ Address: _____

Phone: _____ E-mail: _____

(Required to confirm registration)

Emergency contact: _____ Emergency phone: _____

Age: _____ Sex: _____M _____F I will ride: 60 30 15 (Please circle route choice)

T-shirt size: (please circle) L-Youth S-Adult M-Adult L-Adult XL-Adult XXL-Adult

Registration Fee: \$ _____ Adult - \$50 or <18 - \$30

Additional donation: \$ _____

TOTAL DUE: \$ _____ **Make checks payable to Volunteers In Service**

WAIVER, HOLD HARMLESS & COVENANT NOT TO SUE

In signing this entry and release form for myself or the named entrant, if he/she is under 18, (hereafter collectively referred to as "I"), I hereby agree that I know the risks associated with bicycling events and I willingly accept them. I am covered by my own medical insurance and accept full responsibility for all medical expenses I may incur as a result of my participation in this event. I will permit emergency treatment in the event of injury or illness. To my knowledge, I have no physical or mental conditions that would endanger myself or others by my participation in this event. I have properly maintained my bicycle and related equipment so as to ensure my safety and that of other participants. I agree to wear an ANSI/Snell approved bicycle helmet that may protect against serious head injuries and I assume all liability for the selection of my helmet. I agree to follow safe bicycle practices while participating in this event.

I agree not to sue Volunteers In Service and its employees, officers, and volunteers, and all other event sponsors, whether individuals or organizations (collectively referred to as "Released Parties"). I also agree to hold harmless, and release from all liability for myself and my heirs, the Released Parties of all blame or liability for any injuries, death, losses, damages or inconveniences that I suffer while traveling to, from, and while participating in this event. It is my responsibility to know the Michigan Vehicle Code and other special rules pertaining to this event as set forth in the event materials. I agree that the above representations are contractually binding and not mere recitals. This contract may not be modified orally and a waiver of any provisions contained herein shall not be construed as a modification of any other provisions herein. I HAVE READ THIS CONTRACT, UNDERSTAND IT AND AGREE TO BE BOUND BY ITS TERMS.

Signature of Participant:

Signature of Parent/Guardian:

Date: _____

Date: _____

Please mail completed registration form with payment by **August 7** to:

Volunteers In Service
1940 Eastern Ave. SE
Grand Rapids MI 49507.

Pledge forms available at www.visgr.org.