



## Registration and Release Form

### CCC - H.O.T. Charity Bicycle Ride

### Oct 10, 2009

Name (please print) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Age: \_\_\_\_\_ Tee shirt size (circle your size): S M L XL XXL

Distance that I plan to ride: (check the ride of your preference)

- 25 kilometers (15 mile ride) \_\_\_\_\_ (Turn around at Rt. 40)
- 50 kilometers (34 mile ride) \_\_\_\_\_ (Turn around at Princeville)
- 100 kilometers (62 mile ride) \_\_\_\_\_ (Turn around at Wyoming)

Allergies (if applicable) \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Health Insurance Provider: \_\_\_\_\_

Note 1: All contact information will be maintained confidential and not be distributed beyond use by the staff and management of Chillicothe Christian Church (CCC) for the purposes of having this and future CCC-H.O.T. Charity Rides. If, you wish to have your information deleted after this October 10, 2009 event, check here. \_\_\_

	<u>Individuals</u>
Early-registration fees until 9/30/09	\$20 each
Registration fees after Sept 30, 2009	\$25 each

Note 2: Riders may register up until the day of the rides. Plan your arrival time between 7:00-8:00 am on October 10, 2009. All rides will begin just after 8:00 am. Don't be late.

Note 3: All riders under 18 must be accompanied by an adult.

Name of Accompanying Adult (if applicable) \_\_\_\_\_

### RELEASE

In signing this release for myself, or the named registrant (if under 18), I/We acknowledge that I/We understand the sponsors and their ride organizers (including without limitation the Chillicothe Christian Church) are not insurer of my/our safety during the CCC-H.O.T. Charity Ride, or any activities associated with it. I/WE THUS RELEASE THEM AND AGREE TO HOLD THEM HARMLESS FROM ANY AND ALL LIABILITY ARISING FROM HAVING SUSTAINED ANY PROPERTY DAMAGE OR PERSONAL INJURY BY REASON OF PARTICIPATING IN, SPONSORING, OR ARRANGING THIS EVENT. I/We agree to indemnify the above released parties and each of them for any loss, liability, damage or cost they may incur due to my/our presence in or on the CCC-H.O.T. Charity Ride and the bike routes associated with it. I/We assume full responsibility for and risk of bodily injury, death or property damage while participating in the CCC-H.O.T. Charity Ride.

I/We also hereby consent to permit emergency medical treatment in the event of injury or illness. W/We further release all persons associated with the CCC-H.O.T. Charity Ride in any way from any claim on account of first aid, treatment or service rendered to me/us during participation in the CCC-H.O.T. Charity Ride.

I/We shall abide by all traffic laws, regulations, and practice courtesy and safety in cycling, including but not limited to the wearing of a helmet at all times when riding.

Name/Guardian: (signature) \_\_\_\_\_ Date: \_\_\_\_\_