

Church of the Holy Eucharist
520 Medford Lakes Road , Tabernacle, N.J. 08088
PHONE (609) 268-8383

All bike riders must wear a helmet.

Acknowledgement waiver and release from liability I acknowledge that a bike ride is an extreme test of a person's physical and mental limit and carries with it the potential for death, serious injury, and property loss. I hereby assume the risks of participating in this event. I certify that I am physically fit, have sufficiently trained for this event and have not been advised otherwise by a qualified medical person. I acknowledge that my statements on this AWRL are being accepted in consideration for allowing me to become a participant and are being relied upon by various race sponsors, organizers, and administrators in permitting me to participate in this event. In consideration for allowing me to become a participant, I hereby take the following action for myself, my executors, administrators, heirs, next of kin successors and assigns:

a) I AGREE to abide by the Competitive Rules adopted by, including the Medical Control rules, as they may be amended from time to time and acknowledge that my participation may be revoked or suspended by violation of Competitive Rules;

b) RELEASE AND DISCHARGE from any and all claims of liabilities for death, personal injury, property damage, theft or damages of any kind, which arise out of or relate to my participation, or my traveling to and from this event, the FOLLOWING PERSONS OR ENTITIES: event sponsors, race directors, event producers, volunteers, all states, cities, counties, or locations in which events or segments are held, and officers, directors, employees, representatives and agents of any the above;

c) I AGREE NOT TO SUE any of the persons or entities mentioned above for any of the claims or liabilities that I have waived or discharged herein; and

d) INDEMNIFY AND HOLD HARMLESS the person or entities mentioned above from any claims or liabilities assessed against them as a result of my actions during this event.

I HEREBY AFFIRM THAT I AM EIGHTEEN YEARS OF AGE OR OLDER, I HAVE READ THIS DOCUMENT, AND UNDERSTAND ITS CONTENTS. (If a participant is under 18 yrs of age, a parent or guardian is required to sign.)

X _____
(Signature of Participant or Parent/Guardian)

X _____
(Print or Type Name)

Date _____