2019 Appalachian Bike Tour
Application and Waiver

PREFERRED RIDE

Century Ride ($40 preregistered/$50 day of ride) \_\_\_\_\_\_\_
Metric Century ($40 preregistered/$50 day of ride) \_\_\_\_\_\_\_
20 Mile Loop ($20 preregistered/$25 day of ride) \_\_\_\_\_\_\_
10 Mile Loop ($20 preregistered/$25 day of ride) \_\_\_\_\_\_\_
Fun Loop ($20 preregistered/$25 day of ride) \_\_\_\_\_\_\_

Pre-registration guarantees T-shirt. Some T-shirts will be available on day of race, but availability and size not guaranteed.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
E-Mail Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Telephone Number: ( ) -
Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Age: (If under age 18.) \_\_\_\_\_\_\_\_\_\_\_

T-shirt size: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Helmets are REQUIRED. I understand that the Appalachian Bike Tour requires bicycle helmets to be worn by all participates while operating bicycles and that there is no exception to this requirement. I agree to wear a bicycle helmet at all times during this event when I am operating a bicycle. I am aware of the risks of bicycling and otherwise participating in this event and voluntarily assume such risks. In consideration of being permitted to participate in this event:
(1.) I release for myself, my heirs and personal representatives and the undersigned registrant under the age of 18 (minor)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Lawrence County Democratic Woman's Club and their respective directors, officers, volunteers and staff ("indemnities") from any claim, liability, demand, action, and cause of action whatsoever (collectively claim) arising out of or related to any loss, damage, or injury (collectively "loss"), to myself or my property, that I may sustain in connection with or arising out of this event.
(2.) If registered as a minor, I (as a parent or guardian) agree to indemnify and hold harmless each indemnitee against any claim for any loss said minor may sustain in connection with defending any claim by or on behalf of said minor for any loss.
(3.) Consent to emergency medical treatment if I am injured.
(4.) Shall obey the traffic laws and practice safety in bicycling.
(5.) Agree to wear an CPSC or Snell approved helmet on all bicycling riding on this event. If no signature or guardian appears below, registrant is deemed to confirm being at least of the age eighteen. And I do hereby, grant permission of any photos taken during the tour to be used in the redesign of any future web page for the Appalachian Bike Tour.

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent or Guardian's Signature, if rider is less than 18 years old:

You may make copies of registration forms if needed.

This application must be completed and submitted to appbiketour@gmail.com.
Just submitting payment to Pay Pal will not register you for the ride.