

2008 Rides Around Wilkes

ENTRY FORM

Name: _____ Age: _____ Sex: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: (_____) _____ E-mail: _____

Event: _____ 75-mile _____ 40-mile _____ 25-mile Team: _____

Emergency Contact: _____

Relationship: _____ Telephone: (_____) _____

I am aware of the risks of bicycling and otherwise participating in this event and voluntarily assume such risks. I hereby release and hold harmless the Brushy Mountain Cyclists Club (BMCC) its directors, officers and volunteers from any claim, liability, demand action, or cause of action whatsoever, arising out of or related to any damage or injury to myself or my property that I may sustain in connection with this event. I covenant, warrant and agree that I am entering into this event of my own free will and am voluntarily executing this release. I understand and agree that the sponsor of this event makes no warranties whatsoever and is not insurer of, nor responsible for, my safety during the event. I consent to emergency medical treatment if I am injured during the event. **I agree to wear a properly fitted bicycle helmet and to obey all traffic regulations.** If no parent signs below, I warrant I am 18 years of age or older and I do not suffer from any mental or physical condition that might affect my ability to safely participate in this event.

I have read the following, I understand the content thereof, and I do willingly execute same this the

_____ day of _____, 2008.

Rider's signature

I am the parent or guardian of the above applicant who is under age eighteen (18). By executing this document, I consent to the applicant's participation in this event. I consent to the terms of this release and I agree to be fully bound by the terms of this release, both individually and as parent or guardian.

Signature of parent or guardian (for riders under the age of 18)

T-Shirt Size: S M L XL XXL

- \$25 advance registration fee
- \$30 day of ride registration fee
- Additional \$_____ donation to provide free kids' bike helmets at the Seth Teague Memorial Bike Rodeo day of the RAW

Please make checks payable to BMCC. Mail to:
Brushy Mountain Cyclists Club
P.O. Box 1281
North Wilkesboro, NC 28659

Bib Number _____