



Registration Form

Walk UpMinor Regis	strationTransfer (Or	iginal Rider's Na	me):	_
Other:				
Rider Name:	Date:			
Address:	City:	State	e:Zip:	
Phone:	_Email:			
DOB: (MM/DD/YYYY):	Age: (pa	^r ent/guardian signatı	ure required if under 1	8)
Shirt Size: S M L XL 2XL Lunch:Sausage DogVeggie Burger				
Ride:Mission Tour 17	24 Mile48	MileMetri	c Century (62 mile)
Parent Name:	ent Name:Date:			
Address:	City:	State	e: Zip:	
Phone:	_Email:			
Parent/Guardian Signature:		Date:		
Emergency Contact Name:Emergency Contact Phone:				
How did you hear about us?	? Circle all that apply.			
Previous Rider Bike Club	Bike Store Google	Social Media	Active.com	
Friend:	Other:			
\$70 Rider pledge paid with:				
Cash Check (#) Card/PayPa	al Transfer	/Paid in Advance	

Waiver, Terms, and Conditions

I (and/or my child, for whom I am their parent/guardian) realize the dangers of collision with pedestrians, vehicles, other riders, and fixed or moving objects; the dangers arising from surface hazards and weather conditions; and the possibility of serious physical and/or mental injury, trauma, or even death associated with cycling and hiking events.

I (and/or my child) hereby waive, release, and discharge for myself, my heirs, my executors, administrators, legal representatives, assigns, and successors in interest (herein after collectively "successors"), any and all events, the promoter, MTR Charities, Inc., Rotary Club of San Antonio Mission Trail, sponsors, volunteers, and any other promoting organizations, property owners, law enforcement agencies, public entities through or by which events will be held for any and all damages which may be sustained by me (and/or my child), directly or indirectly in connection with, or rising out of, my participation in association with the event or travel to/from the event.

I (and/or my child) agree it is my/their sole responsibility to be familiar with the course, the rules, and special regulations for the event. I (and/or my child) understand and agree that situations may arise during the ride that may be beyond the immediate control of ride officials/organizers, and I (and/or my child) must continually ride or walk so as to neither endanger myself or others. I accept responsibility for the condition and adequacy of my equipment. I (and/or my child) accept responsibility for the condition and adequacy of my/their equipment. I (and/or my child) have no physical or medical condition to my/their knowledge that would endanger me or others as I participate in this event. I (and/or my child) agree, for my/themselves and my/their successors, that the above representations are contractually binding and are not mere recitals and that I/they should, or my successors shall, be liable for all expenses (including legal fees) incurred by other party/ies in defending, unless the party/ies are finally adjudged liable on such claim, for willful and wanton negligence. This agreement shall not be modified orally, and a waiver of any provision shall not be construed as a modification of any other provisions herein.

MTR Charities, Inc., Rotary Club of San Antonio Mission Trail, the event, sponsors, organizers, and/or their agents shall be permitted to use the photography and other records of this event for any purpose.

All participating riders must wear safety approved bicycle helmets and follow all state and local traffic laws. Riders should wear appropriate, visible attire.

The event may be cancelled without prior notice due to extreme weather and/or other dangerous riding conditions. If cancelled, all registration fees will be donated to MTR Charities, Inc. for distribution to selected local charities.

Donations to MTR Charities, Inc., are tax deductible to the extent allowed by law.

Date:

Parent/Guardian Printed Name:	
Parent/Guardian Signature:	Date: