

Fun Day Bicycle Tour August 22, 2009
KIWANIS FUN DAY BIKE TOUR ENTRY FORM

NAME:			
NAME:		Relationship/AGE:	
NAME:		Relationship/AGE:	
NAME:		Relationship/AGE:	
NAME:		Relationship/AGE:	
ADDRESS:			
City:			
State:	Zip Code		
Phone:		Work:	Cell:
Home			
Our sponsor Rent One			

PLEASE READ CAREFULLY

In signing the entry form for myself or family members or for the named participant (if under 18 years old), I know that those participating in this event will be exposed to risks. Also, I (we) have trained for this event. The equipment used by the rider has been inspected by me and is in good working condition and the rider is familiar with its proper use. I am aware that medical support for this event and other personnel who may be called upon to provide assistance, including first aid, to me during this event will be voluntary. I consent and authorize any such volunteer to assist me or to perform such assistance.

SIGNING OF INSURANCE WAIVER REQUIRED:

I understand that all Promoters, Advertisers, Organizers, and other voluntary workers at this event assume no responsibility or liability with respect to my participation in this event. I agree, however, to abide by the rules of the road set forth by the organizers for my safety. I further agree to wear a CPSC, ANSI, SNELL, or ASTM approved bicycle helmet at all times while riding my bicycle during this event. I, further, agree to indemnify and to hold harmless the persons and entities listed in this agreement for any liability for any harm or injury to me, a member of my family, or the participant in connection with this event. By signing this entry form I am agreeing to all facets of this agreement for myself and my family.

I have read the waiver agreement that accompanied this entry form and agree to all articles of said agreement.

Emergency contact:

Contact		Phone:	
Sign by:		Dated	- -
Sign by:		Dated	- -
Sign by:		Dated	- -

Above parent or guardian On the ride All children must be accompanied by a parent or guardian no exception

Sign up and Fees - please check each box that applies					Unit	Number	Total			
<input type="checkbox"/>	15 Miles	<input type="checkbox"/>	30Miles	<input type="checkbox"/>	60Miles	<input type="checkbox"/>	108+ miles	\$25.00		\$

Family Rate: Entries includes parents and young children under 18 years (includes 1 free T Shirt)

Prior to August 1, 2009 \$40.00 Member of the same household								\$		
<input type="checkbox"/>	Medium	<input type="checkbox"/>	Large	<input type="checkbox"/>	X Large	<input type="checkbox"/>	XX Large	Free	1	\$ 0.00

Extra T-shirt please mark the quantity and size

<input type="checkbox"/>	Medium	<input type="checkbox"/>	Large	<input type="checkbox"/>	X Large	<input type="checkbox"/>	XX Large	\$10.00		\$
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Late Fee After August 1, 2009
NO REFUNDS

	\$10.00		\$
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Donation to Division 33 Kiwanis-THANK YOU!	\$
Total amount of money enclosed	\$

Make check payable to and mail to:

Kiwanis Fun Day Bike Ride <P O Box 1601 >Mount Vernon, Illinois 62864
 registration: <http://www.active.com> info@fundaybikeride.com For on line