

2017 Smithfield Challenge Ride Registration Form
One Person per Form

Peninsula Bicycling Association
Event date Saturday May 27, 2017

Name _____ email address _____

Street _____

City _____ State _____ Zip _____

Telephone Numbers: Landline Cell

- Rider: _____
- Emergency Contact: _____

Mail to: Peninsula Bicycling Association
P.O. Box 12115
Newport News, VA 23612-2115
Must be postmarked by May 20

Postmarked by April 30 is **Early** **Late** is postmarked May 1 thru May 20.

- Adult: PBA member \$25 \$35
- Non-member \$30 \$40
- 12 and under \$15 \$15
- On-site convenience fee add \$ 5 **Note: on-site is cash only.**

Release and Waiver: In signing this application, I hereby make it known to whoever it may concern, that during Peninsula Bicycling Association activities-with full realization that there are known and unknown hazards to these activities-I do hereby: assume all risk for injury, loss or damage foreseeable or not, which I and/or any children under the age of 18 in my care may sustain as an accident to such activities. I warrant to make no claim at law or equity against the Peninsula Bicycling Association or any participant arising out of any injury, loss, or damage from whatever cause during a Bicycling activity, PROVIDED HOWEVER that this release shall not be construed to limit my right to proceed any class of persons specifically excluded herein, who negligently cause injury, loss, or damage to the persons named on this application. **Applicant or parents/guardians of minors (under the age of 18) must sign below.**

_____ **One person per form. Form may be duplicated.**

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