

EHYFS RIDE OR STRIDE WAIVER AND RELEASE OF LIABILITY

First Name	Last Name	Age
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Street Address	City	State	Zip
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Phone	email
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Emergency Contact	Emergency Contact Number
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Release Of Liability. This Must Be Signed. Please Read Carefully. I realize that the EHYFS Ride or Stride event requires physical conditioning, and I represent that I am in sound medical condition, and that I have no physical or medical condition that would endanger myself or others. I accept responsibility for the condition of my bicycle and agree to abide by all rules of the ride, especially the wearing of an ANSI, SNELL, or ASTM approved bicycle helmet at all times while riding my bicycle on the Ride. I agree to follow all instructions of leaders and volunteers. I understand this is not a race, and I will abide by all traffic and pedestrian laws and requirements. I understand and am aware that there are a variety of specific risks and dangers inherent in a voluntary bicycling event including, falls, collisions with other bicyclists, motor vehicles or stationary objects; adverse weather conditions; and those caused by conditions of the road. I also understand that by bicycling the EHYFS Ride or Stride I will be riding my bicycle on public roads. I understand that bicycling involves a risk of injury, and that injuries are an ordinary occurrence of the an event like the EHYFS Ride or Stride, and while particular rules, equipment, safety instruction, and personal discipline may reduce this risk, the risk of injury does exist. I agree, for myself and on the behalf of my heirs and anyone authorized to act on behalf of either, to freely and expressly assume and accept any and all risks relating to this event. I agree to release the sponsors and promoters of the ride, including East Haddam Youth and Family Services (EHYFS) its officers and volunteers and it's Affiliated Parties for injuries or damages, which result, either directly or otherwise, from my participation in the Ride. I understand that the term Affiliated Parties as used in this waiver includes partners, sponsors, volunteers, property owners or lessors, government agencies, and others endorsing, planning, or carrying out any component of the Ride. I agree not to make a claim against or sue EHYFS or its Affiliated Parties for injuries or damages related to the Ride. I am aware that this is a release of liability. I am signing it freely and of my own accord and I recognize and agree that it is binding upon myself, my heirs and assigns, and in the event that I am signing it on behalf of any minors, I have full legal authority to do so, and realize the binding effect of this contract on them, as well as on myself.

Print Participant Name _____
Signature _____
Date _____

MINOR RELEASE: In addition to the above agreement, I, the minor's parent and/or legal guardian, understand the nature of bicycling activities and the minor's experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activity.
Name of Minor _____

Name of Parent/Guardian _____

Parent/Guardian Signature: _____ Date _____