



EPIC USE ONLY:

Rider # _____

Date _____

Amount _____

Old Pueblo Gymnastics Academy Kids Fun Ride
Sunday, February 16, 2014
Push Bikes & Trikes 12:30p • Singletrack 12:55p

PARTICIPANTS (First and last name)

Escort's Name _____ DOB _____
Child 1: _____ DOB _____ Child 3: _____ DOB _____
Child 2: _____ DOB _____ Child 4: _____ DOB _____
Mailing Address _____ City _____ ST _____ Zip _____
Emergency Contact _____ Phone # _____

CATEGORY

Push Bikes & Trikes 12:30p - 12:50p Singletrack 12:55p - 1:30p

Make check payable to: Epic Rides

\$10 Registration Fee x _____ child(ren)

TOTAL PAID \$ _____

ACCIDENT WAIVER AND RELEASE OF LIABILITY

As a parent/guardian and escort, I understand that participating in the Old Pueblo Gymnastics Academy Kids Fun Ride is potentially hazardous, and that my child(ren) and I should not enter and participate unless my child(ren) and I are medically able and properly trained. In consideration of the acceptance of this waiver of liability, as a parent/guardian, I assume full and complete responsibility for any injury or accident which may occur while my child(ren) and I are traveling to or from the event, during the event, including but not limited to falls, contact with other participants, volunteers, effect of weather, traffic, natural obstacles of nature and conditions of roads and/or trails. I, for myself and behalf of my child(ren) and our heirs and executors, hereby waive, release and forever discharge Mountain Bike America, LLC. Dba Epic Rides, the event organizers, sponsors, land owners and managers, promoters and each of their agents, representatives, successors and assigns, and all other persons associated with the event, from all liabilities, claims, actions, or participate in this event as a bicycling entrant or volunteer; **My child(ren) and I will wear an approved helmet that meets the highest and most current safety standards**; that my child(ren) and I are physically fit and have sufficiently trained for our participation in this event and that our physical condition has been verified by a licensed medical doctor.

As a parent/guardian and escort, I understand that this waiver includes any claims, whether caused by negligence, the action or inaction of any of the above parties, or otherwise.

I understand that the entry fee is non-refundable and non-transferable. I hereby grant full permission to any and all of the the above parties to use any photographs, videotapes, motion pictures, website images, recordings or any other record of this event which may include myself and my child/ren for any legitimate purpose.

I hereby grant full permission to Mountain Bike America, LLC. Dba Epic Rides (in accordance with HIPAA standards) to access any medical information recorded regarding my and my child(ren)'s condition during the Old Pueblo Gymnastics Academy Kids Fun Ride.

As a parent/guardian and escort, I hereby certify that I have read this document and understand its content.

The undersigned parent and natural guardian or legal guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, claim or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parents or legal guardian.

PARENT'S OR GUARDIAN'S SIGNATURE _____ **DATE:** _____

ESCORT'S SIGNATURE _____ **DATE:** _____