

Sprockids getting people out on bikes

Sprockids *After-School-Cool* **Program** €

Rider's Waiver Form

AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in the Sprockids After-School-Cool mountain bike program, related events and Sprockids activities, the undersigned acknowledges, appreciates, and agrees that:

- 1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
- 2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
- 3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,

AND HOLD HARMLESS	ielis, assigris, personal representatives and riext of kiri, herebit release
their officers, officials, agents and/or em and, if applicable, owners and lessors of	ployees, other participants, sponsoring agencies, sponsors, advertisers, premises used to conduct the event ("Releasees"), WITH RESPECT TO or loss or damage to person or property, WHETHER CAUSED BY THE WISE.
	nd assumption of risk agreement, fully understand its terms, tantial rights by signing it, and sign it freely and voluntarily
X	
XPARTICIPANT'S SIGNATURE	PARTICIPANT NAME (printed)
XWITNESS	Date Signed:
	TICIPANTS OF MINORITY AGE R AGE 18 AT TIME OF REGISTRATION)
his/her release as provided above of a	with legal responsibility for this participant, do consent and agree to the Releasees, and, for myself, my heirs, assigns, and next of kin, I eleasees from any and all liabilities incident to my minor child's rams as provided above.
X	
XPARENT/GUARDIAN'S SIGNATURE	PARTICIPANT NAME (printed)
x	
WITNESS	EMERGENCY PHONE NUMBER