



DELTA PEDALERS BICYCLE CLUB

Ride Description: _____

Date: _____

Ride Leader: _____

Total Miles: _____

EACH RIDER IS REQUIRED TO READ AND SIGN THE FOLLOWING RELEASE OF LIABILITY AGREEMENT

In consideration of my being permitted to take part in this bicycle event, I, for myself, my heirs, executors, administrators, successors, and assigns, waive, release, and discharge all claims for damages resulting from death, personal injury or property damage which I may have, or which may hereafter accrue to me as a result of my participation in this event. I understand this release is intended to discharge and release in advance, the Delta Pedalers Bicycle Club, its members and their respective agents, officers, officials, servants, and representatives from and against any and all liability arising out of or connected in any way with my participation in this ride even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above.

I further understand that serious accidents occasionally occur during bicycling events and that participants in such events occasionally sustain serious injury, death, and/or property damage as a consequence of that participation. Nevertheless, knowing the risks of bicycling, I, for myself, my heirs, executors, administrators, successors, and assigns hereby agree to assume those risks and to release and hold harmless all of those persons or entities mentioned above who, through their negligence or carelessness, might otherwise be liable to me for damages.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE DELTA PEDALERS BICYCLE CLUB, AND SIGN IT OF MY OWN FREE WILL.

	<u>Rider's Name (print)</u>	<u>Signature</u>	<u>Emergency Phone #</u>	<u>Club Member (Y/N)</u>
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____
5	_____	_____	_____	_____
6	_____	_____	_____	_____
7	_____	_____	_____	_____
8	_____	_____	_____	_____
9	_____	_____	_____	_____
10	_____	_____	_____	_____
11	_____	_____	_____	_____
12	_____	_____	_____	_____

APPROVED HELMETS MUST BE WORN ON ALL CLUB RIDES

Return completed sheet to Ride Coordinator or mail to PO Box 2394, Antioch, CA 94531