



\$50.00 REGISTRATION FEE | ALL PARTICIPANTS MUST WEAR A HELMET

www.biking4books.org

Please email us at info@biking4books.org or contact Barry Bryant at 314.313.8821 or Faraz Ahmad at 314.422.8288 for any questions.

FULL NAME _____

GENDER M F ARE YOU OVER THE AGE OF 18? YES NO (If under 18, a parent or legal guardian must authorize participation.)

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE NUMBER () _____ EMAIL _____

EMERGENCY CONTACT PERSON PHONE NUMBER () _____

RACE YOU ARE RIDING 10-mile 25-mile

PAYMENT CASH CHECK (Please make all checks payable to Biking for Books.) CREDIT CARD

CREDIT CARD HOLDER NAME _____

CREDIT CARD # _____ SECURITY CODE (Last 3 digits on back of card.) _____ EXPIRATION DATE _____

Completed registration forms should be mailed to:
 42 Bopp Lane
 St. Louis, MO 63131



BIKING FOR BOOKS PARTICIPATION TERMS AND CONDITIONS

1. I acknowledge that cycling involves real risk of injury from various causes including over exertion, equipment failure, dehydration, accidents with other bikers, spectators or road users, course or weather conditions and other causes.
2. I understand that I should not engage in this event unless I have trained appropriately and my physical condition has been verified by a medical practitioner.
3. By participating in this event, I accept all risks, known and unknown, even if arising from the negligence of the organizers, necessarily flowing from my participation which could result in my injury.
4. I, for myself and on behalf of my heirs, assigns and personal representatives, hereby release and hold harmless Biking for Books, Inc., its organizers, volunteers, officers, officials, agents, and/or employees, other participants, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event with respect to any and all claims for damages for injury disability, death or loss or damage to person or property, whether arising from negligence or otherwise, to the fullest extent permitted by law.

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it and sign it freely and voluntarily without any inducement.

Participant signature _____

Date _____

FOR PARTICIPANTS UNDER THE AGE OF 18 AT THE TIME OF REGISTRATION

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above, and for myself, my heirs, assigns and personal representatives, I release and agree to indemnify and hold harmless Biking for Books, Inc., its organizers, volunteers, officers, officials, agents, and/or employees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, whether arising from negligence or otherwise, to the fullest extent permitted by law.

Parent/Legal guardian signature _____

Date _____

