

THE GLENS FALLS CIVIC CENTER FOUNDATION PRESENTS THE 1ST ANNUAL

PUCKS AND PEDALS BIKE TOUR

May 19, 2018 - 9:00 A.M & 9:15 A.M.

Location: Cool Insuring Arena

Check-In: 8:00 A.M – 8:45 A.M. day of the event

40-Mile Course: "Southern Route" along the Hudson River to Schuylerville and returning to Cool Insuring Arena

20-Mile Course: "Northern Route" from Glens Falls to Lake George via the Warren County Bikeway and returning to Cool Insuring Arena

Pre-Registration Is Suggested - www.bikereg.com

Race Day Registration: 8:00 A.M. – 8:45 A.M.

Last Name _____ First Name _____ Initial _____

Address _____ Phone _____ Sex M F

City _____ State _____ Zip Code _____ Age _____

E-Mail Address _____

I know that participating in the Pucks and Pedals Bike Tour events is a potentially hazardous activity. I agree not to enter and participate unless I am medically able and properly trained. I agree to abide by any decision of an event official relative to my ability to safely complete the event. I am voluntarily entering and assume all risks associated with participating in the event, including, but not limited to, falls, contact with other participants, spectators or others, the effect of the weather, including, snow, sleet and rain, traffic and the conditions of the course, all such risks being known and appreciated by me. I grant to the Glens Falls Civic Center Foundation its designee access to my medical records and physicians, as well as other information, relating to medical care that may be administered to me as a result of my participation in this event. Having read this Waiver and knowing these facts, and in consideration of your acceptance of this application, I, for myself and anyone entitled to act on my behalf, waive and release The Glens Falls Civic Center Foundation, the City of Glens Falls, Cool Insuring Arena, Adirondack Civic Center Coalition and their agencies and departments, and all sponsors, and their representatives and successors, from present and future claims and liabilities of any kind, known or unknown, arising out of my participation in this event or related activities, even though such claim or liability may arise out of negligence or fault on the part of any of the foregoing persons or entities. I grant permission to the foregoing persons and entities to use or authorize others to use any photographs, motion pictures, recordings, or any other record of my participation in this event or related activities for any legitimate purpose without remuneration.

Signature _____ Date _____

Signature of Parent (if under 18) _____