

Keweenaw Chain Drive Festival - June 19, 2010

PARTICIPANT INFORMATION

First Name: _____
Last Name: _____
Address: _____
City: _____
State: _____ Zip: _____
Email: _____
Daytime Phone: _____
Age on Race Day: _____ DOB: _____
Sex (circle): M F



SHIRT SIZE* (circle): XS S M L XL XXL

*Registrations must be postmarked by May 31st to receive event shirt.

RACE REGISTRATION

\$ _____ **16 Mile - Age 18 & Under (\$25)**

\$ _____ **16 Mile (\$35)**

\$ _____ **32 Mile - Age 18 & Under (\$35)**

\$ _____ **32 Mile (\$35)**

\$ _____ **Add \$15 Late Fee if mailed after May 31st,**

\$ _____ Enclosed is an additional donation to help fund trail building,
acquisition, and trail maintenance in the Keweenaw

\$ _____ **Total amount enclosed**

RACE CATEGORIES (Choose 1)

_____ Age Group

_____ Singlespeed

_____ Clydesdale (Men Over 200lbs - 16 Mile Only)

_____ Expert/Open - 32 Mile Only*

*Racing for Overall Cash - Not eligible for Age Group Awards

SIGNED WAIVER ENCLOSED

_____ Yes

PAYMENT INFORMATION

Make checks payable to:

Keweenaw Chain Drive Festival

Send completed registration form and waiver to:

Keweenaw Chain Drive Festival

c/o KPCC

P.O. Box 336

Houghton, MI 49931

One form per entrant, copies are acceptable or you can register online at www.chaindrive.org

Keweenaw Chain Drive Festival, June 19, 2010
ACCIDENT WAIVER AND RELEASE OF LIABILITY

I, the undersigned, acknowledge that the KEWEENAW CHAIN DRIVE FESTIVAL is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to, those caused by natural and man-made terrain, facilities, temperature, weather, condition of athletes, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials and event monitors, and/or producers of the event, and lack of hydration. I HEREBY ASSUME ALL RISKS OF PARTICIPATING IN THIS MOUNTAIN BIKE EVENT. I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability without fault. I acknowledge that this Accident Waiver and Release of Liability (AWRL) from will govern my actions and responsibilities at said event and I alone am responsible for my safety while taking part in the festival.

In consideration of my application and participation in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assign as follows: (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me during my traveling to and from this event. The following entities or persons: The Keweenaw Chain Drive Festival and organizing committee, their directors, officers, employees, volunteers, representatives and agents, the event holders, event sponsors, event volunteers; (B) Indemnify and hold harmless the entities or persons mentions in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of any of my actions during this event.

I certify that I am physically fit, have sufficiently trained for participation in this event and have not been advised otherwise by a qualified medical person. I hereby consent to receive medical treatment that may be deemed advisable in the event of injury, accident and/or illness during this event.

I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and or assigns.

The AWRL shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I HEREBY CERTIFY THAT I HAVE READ THIS DOCUMENT; AND, I UNDERSTAND IT'S CONTENT.

Signature of Entrant: _____ Date _____

Parent Guardian Waiver for Minors (Under 18 years old): 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, cost, 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.

Signature of Parent/Guardian: _____ Date _____