

40th Annual BTVB Best 'Wurst' Bike Ride 2018

COPY AS NEEDED; ONE CYCLIST PER REGISTRATION, PLEASE.

NAME: (Print Legibly) _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ E-MAIL: _____

EMERGENCY CONTACT (NAME & PHONE NUMBER): _____

Planned Distance? **65 35 or Family Ride 12-miler** Age: **10 and under 11 – 20 21 and over**

In signing this release for myself or the named participant (if participant is under age 18), I know that those participating in The Best "Wurst" Bike Tour (BWBT) will be exposed to the risks of serious bodily injury, sickness, death, or loss of property due to circumstances inherent in this event including the negligent acts or omissions of others. I also understand and am aware that there are a variety of specific risks and dangers inherent in a voluntary bicycling event such as BWBT including, without limitation, falls, and collisions with other bicyclists, motor vehicles or stationary objects; adverse weather conditions; and those caused by conditions of the road. I also understand that by participating in BWBT I will be riding my bicycle on public roads with many other bicyclists, some of whom may be inexperienced at riding in groups. I also understand that the large number of bicyclist in BWBT many of whom are inexperienced adds a further element of danger. In exchange for being permitted to participate in BWBT I voluntarily agree to assume all of these and the other risks inherent in BWBT. I acknowledge that I (or the participant for whom I sign if under age 18) am physically capable and sufficiently trained for the completion of this event. I also attest that the equipment used by me (or the participant for whom I sign if under age 18) has been inspected by me and is in good mechanical condition and that I am familiar with its proper use. I am also aware that medical support for this event will be provided by volunteer and other personnel who may be called upon to provide assistance, including first aid, to me during the event. I consent and authorize any such volunteer to assist me (or the participant for whom I sign if under age 18) is not an admission of liability to provide or to continue to provide any such services and is not a waiver by any of said parties' right under this agreement. I understand that Bucyrus Tourism and Visitors Bureau assumes no responsibility or liability with respect to my participation in this event. I agree, however, to abide by any decision of any official/representative of Bucyrus Tourism and Visitors Bureau relative to my ability to safely participate in this event. I further promise to wear a CPSC, ANSI, SNELL, or ASTM approved bicycle helmet at all times while riding my bicycle during the BWBT and I agree to waive my rights to any benefits associated with this event if I fail to wear such a helmet while on my bicycle. Having read this waiver and knowing these facts and in consideration of Bucyrus Tourism and Visitors Bureaus' acceptance of my application for participation in BWBT, I, for myself and anyone entitled to act on my behalf, do hereby agree to release, hold harmless, and discharge Bucyrus Tourism and Visitors Bureau, all sponsors, representatives (including event volunteers), any involved municipalities or other organizations and the boards, trustees, officers, employees of any of them, from any and all claims or liabilities of any kind arising out of my participation in BWBT even though that liability may arise out of negligence, recklessness, or carelessness on the part of the persons or entities named in this waiver. I also grant permission to Bucyrus Tourism and Visitors Bureau and its sponsors to use any photographs, motion pictures, recordings or any record of my participation in BWBT for legitimate purposes. I further agree to indemnify and to hold harmless the persons and entities listed in this agreement for any liability they incur to me, a member of my family, or the participant in connection with BWBT. I further agree that if, in breach of this agreement, I institute any judicial proceedings against any of the persons listed in this agreement in connection with BWBT, I shall bring them in the Common Pleas Court of Crawford County, Ohio, and I consent to personal jurisdiction in that court. I further agree that, if in breach of this agreement, I institute any such proceedings; I am responsible for all costs and attorney's fees of any person or entity against which I institute such proceedings. I confirm that the named participant below will have reached at least his/her 2nd birthday by August 18, 2018, if he/she will be pulled by or riding on a bicycle on BWBT. I understand and agree that there will be no refunds after July 20, 2018. Having read and understood this agreement, I voluntarily and knowingly sign it.

Participant SIGNATURE: _____ DATE: _____

For Participants under age 18, Custodial Parent or Legal Guardian must sign below

Parent/Guardian SIGNATURE: _____ DATE: _____

PLEASE NOTE: Riders on the longer routes who are not registered early will be unsupported after 3:30 p.m.

WE REQUIRE EVERYONE TO USE HELMETS FOR SAFETY. Where did you hear about this tour? _____

THANK YOU FOR YOUR PARTICIPATION IN OUR 2018 BTVB BEST "WURST" BIKE TOUR!

PAYMENT FORM:

Bike Tour (Includes 2018 Commemorative T-Shirt – must pre-register & pre-pay by August 1 to ensure t-shirt)

Registration Fee \$40.00

PART 2: Short Sleeve T-SHIRT ORDER (Must pre-register & pre-pay by Aug. 1)

• SS T-Shirt Youth Size: YS | YM | YL
• SS T-Shirt Adult Size: Adult S Adult M | Adult L | Adult XL Adult XXL(\$1 more)| Adult XXXL(\$2 more) T-Shirt Extra Charge \$ _____

TOTAL RIDE & SHIRT \$ _____

PLEASE MAIL SIGNED ENTRY FORM AND CHECK MADE PAYABLE TO: BUCYRUS TOURISM & VISITORS BUREAU (BTVB) 117 E. MANSFIELD ST., BUCYRUS, OH 44820