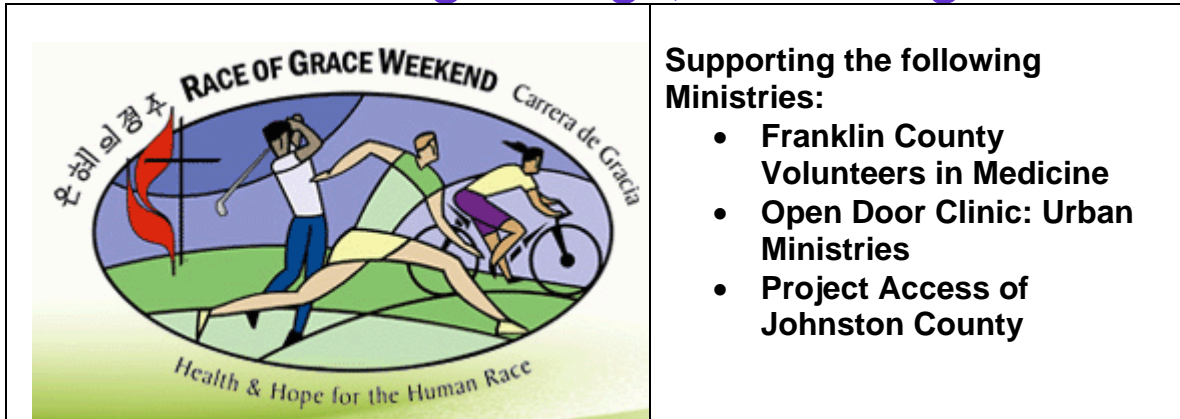


# 2010 Tour de Grace

**SATURDAY, APRIL 24 — 9:00 AM —  
at Louisburg College, Louisburg NC**



**PLEASE CIRCLE DISTANCE:                      32-MILE                      52-MILE**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_  
Gender: M   F   Birthdate \_\_\_ / \_\_\_ / \_\_\_  
Church \_\_\_\_\_  
Emergency Contact / Phone \_\_\_\_\_

## REGISTRATION FEE

- By 4/19 \$ 15
- After 4/19 & on Race Day \$ 20
- T-shirt \$ 5 each if ordered by 4/19

Circle size: **S M L XL XXL**

Optional tax-deductible donation \$ \_\_\_\_\_

**TOTAL FEE ENCLOSED \$ \_\_\_\_\_**

Please enclose signed waiver and send check payable to:

**Tour de Grace Bike Ride  
141 Gregory Manor  
Youngsville, NC 27596**

# Tour de Grace

## WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

("AGREEMENT")

IN CONSIDERATION of being permitted to participate in any way in the RACE OF GRACE – Tour de Grace bicycling event sponsored by the Raleigh District of the North Carolina Conference of the United Methodist Church (the "District"), I, for myself, my personal representatives, assigns, heirs, and next of kin: 1. ACKNOWLEDGE, agree, and represent that I understand the nature of Bicycling Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further acknowledge that the Activity will be conducted over public roads and facilities open to the public during the Activity and upon which the hazards of traveling are to be expected. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. I agree that if I am 14 years old or younger, I will ride with a parent or legal guardian. A parent or legal guardian has approved of my participation if I am younger than 18 years of age. I further agree that I will wear a helmet at all times during the event. 2. FULLY UNDERSTAND that: (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in the Activity. 3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the District, the North Carolina Conference, the United Methodist Church, and their respective churches, administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHER PARTIES, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

I agree to the above conditions. (For participants under age 18, parent or guardian must acknowledge his or her agreement below.)

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_/\_\_/\_\_\_\_

**Parent or guardian's acknowledgement:** I am the parent or guardian of the minor whose name and signature appears immediately above, and I personally believe the minor to be qualified to participate in the event. I agree to and ratify the provisions above in all respects for myself and for the minor, and I have personally ensured that an adult will be riding with the minor during the event.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_/\_\_/\_\_\_\_