

**Registration Form
(One Name per Form)**

Name _____
Address _____
City _____ Zip _____
Phone _____ (Home) _____ Cell _____
E:Mail _____
Age _____ Date of Birth _____

Emergency Contact: _____
Phone _____ Other _____

Medical Condition: ___ Y ___ N
Explain if Yes _____

_____ I will be pitching a tent at 24 Hour Ride
_____ I will NOT be pitching a tent at 24 Hour Ride
_____ I can volunteer my time to help where needed
Time Frame Available _____

\$45.00 Cost of Event + \$60.00 min. Sponsorship Fee
100% of Sponsorship Fee divided between:
Cycling the Loop . . . NCAC Council
and Local Area Trail Building Organizations

NOTE: All Riders must have lights mounted on their bikes and helmets for riding during the night hours

Make check Payable to: BSA Troop 165
Mail to: 10400 Dynasty Ct., Fred'bg, VA 22408

for additional information and registration form
Visit our Website: www.cyclingtheloop.org

Release & Assumption of Risk

In consideration of my participation, I waive, release, discharge myself, my heirs, executors, legal representation (including successors), any and all rights and/or claims which I have, may have, or hereafter accrue to me against the sponsors and promoters of CYCLING THE LOOP-24 HOUR FUNDRAISER, (CTL-24HRF), or other sponsors or affiliated organizations and their respective agents, officers and employees for any and all damages, injuries or claims which may be sustained by me directly or indirectly arising out of my participation in CTL-24HRF.

I, the undersigned, acknowledge and realize the dangers in participating in CTL-24HRF, and fully assume all risks including, but not limited to, collision with other riders, vehicles, and/or fixed or moving objects, the negligence of other riders, sponsors, promoter, or drivers, and dangers arising from falls, equipment failure, weather conditions, as well as physical and/or mental trauma (or injury).

I realize the CTL-25HRF requires physical conditioning and I represent that I am in sound medical condition. I have no physical or medical impediment which would danger others.

I will wear a CPSC, ASTM or SNELL certified helmet when riding a bike during CTL-24HRF. I agree that my photograph, video, or voice may be used in promotion or advertising for CTL-24HRF with no compensation due.

The above agreements are my express understanding of the risks, and I assume these voluntarily and freely without coercion or duress. I accept responsibility for the condition and adequacy of my bicycle and agree to abide by the rules of CTL-24HRF relating to wearing a helmet, appropriate behavior, as well as other organization requirements.

Signature of Participant & Date

Parent / Guardian Release (For those under 18 years of age)

Anyone under 18 must complete the following. Having fully read the above release, I, as parent or guardian of the above named minor, hereby give my permission and consent voluntarily for my child to participate in CTL-24HRF.

Signature (Parent or Guardian)

**The 24 Hour Bike-A-Thon will be held at the Spotsylvania Courthouse
Village on Courthouse Road in Spotsylvania, Virginia**