



Klunker Crit  
Friday, May 19, 2017 • 6:00PM



**NOTES**

- All riders are required to be off the course by 6:10p
- All riders are required to wear a helmet that complies with US CPSC safety standards
- All riders and their bikes are encouraged to wear a costume

**PARTICIPANTS** *(One registration form per household)*

(1)Rider's Full Name \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 (2)Rider's Full Name \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Child 1: \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Child 2: \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Child 3: \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Mailing Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_  
 Emergency Contact *(on-site)* \_\_\_\_\_ Phone # \_\_\_\_\_

**EVENT PARTICIPANT & VOLUNTEER WAIVER of LIABILITY**

**Assumption of Risk:** I understand that participating in an Epic Rides Off-Road Series endurance mountain bike event exposes me to many hazards and entails unavoidable risk of death, personal injury (at any level of severity) and loss of or damage to property. I also understand that I should be in good physical health and properly trained to participate.

**Waiver and Release:** In consideration of the acceptance of this entry, I assume full and complete responsibility for any injury or accident which may occur while I am traveling to or from the event, during the event, or while I am on the premises of the event. I also am aware of and assume all risks associated with participating in this event, including but not limited to falls, contact with other participants, effect of weather, traffic, natural obstacles of nature and conditions of roads and/or trails. I, for myself and my heirs and executors, hereby waive, release and forever discharge Mountain Bike America, LLC. Dba Epic Rides, the event organizers, sponsors, land owners and managers, their Boards, officials, employees, and agents, promoters and each of their agents, representatives, successors and assigns, and all other persons associated with the event, from any and all claims, actions, liabilities, costs, damages, or expenses, including but not limited to court costs and reasonable attorney's fees arising out of bodily injury or death, or tangible or intangible property damage, which I or my heirs, executors, successors or assigns ever may have in connection with participation in this event and hereby waive all such claims, demands and causes of action. I attest that I will participate in this event as a bicycling entrant; I will wear an approved helmet; that I am physically fit and have sufficiently trained for the completion of this event and that my physical condition has been verified by a licensed medical doctor.

I understand that this waiver includes any claims, whether caused by negligence, the action or inaction of any of the above parties, or otherwise.

I hereby grant full permission to any and all of the above parties to use any photographs, videotapes, motion pictures, website images, recordings or any other record of this event for any legitimate purpose.

I hereby grant full permission to Mountain Bike America, LLC. Dba Epic Rides (in accordance with HIPAA standards) to access any medical information recorded regarding my condition during an Epic Rides Off-Road Series endurance mountain bike event.

**The Grand Junction Off-Road Klunker Crit will be finished at 6:10PM on Friday, May 19, 2017. All course support will be closed at 6:10PM.**

**In signing this waiver I agree to be totally responsible for my own safety and support after 6:10PM on May 19, 2017.**

(1)Rider/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

(2)Rider's Signature \_\_\_\_\_ Date \_\_\_\_\_