

Klunker Crit Friday, June 16, 2017 • 6:00PM



NOTES

- Parents are encouraged to ride with their children around the course
 All riders are required to be off the course by 6:15pm
 All riders are required to wear a helmet that complies with US CPSC safety standards

PARTICIPANTS (one registration form Address	-	State	Zip
Email Address			
Emergency Contact			
Rider/Parent's Name	DOB	Plate	Number
Rider/Parent's Name			
Child's Name	DOB	Plate	e Number
Child's Name			
Child's Name			
Assumption of Risk: I understand that p exposes me to many hazards and entails undamage to property. I also understand that Waiver and Release: In consideration of injury or accident which may occur whill premises of the event. I also am aware of a	navoidable risk of death, personal I should be in good physical hear the acceptance of this entry, I as a I am traveling to or from the end assume all risks associated with	injury (at any level of th and properly train sume full and completent, during the eventh th participating in this	of severity) and loss of or ned to participate. ete responsibility for any ent, or while I am on the s event, including but not
limited to falls, contact with other participa and/or trails. I, for myself and my heirs America, LLC. Dba Epic Rides, the every employees, and agents, promoters and each associated with the event, from any and limited to court costs and reasonable attorn damage, which I or my heirs, executors, su and hereby waive all such claims, demand entrant; I will wear an approved helmet; to event and that my physical condition has be	and executors, hereby waive, repent organizers, sponsors, land over the of their agents, representatives, all claims, actions, liabilities, coney's fees arising out of bodily injuccessors or assigns ever may have als and causes of action. I attest that I am physically fit and have	elease and forever delease and managers successors and assignsts, damages, or expury or death, or tangilate in connection with part I will participate in sufficiently trained f	lischarge Mountain Bike e, their Boards, officials, gns, and all other persons benses, including but not ble or intangible property participation in this event in this event as a bicycling
I understand that this waiver includes any parties, or otherwise.	claims, whether caused by negligon	ence, the action or ina	action of any of the above
I hereby grant full permission to any and website images, recordings or any other re			eotapes, motion pictures,
I hereby grant full permission to Mountain access any medical information recorded mountain bike event.			
The Carson City Off-Road Klunker Cribe closed at 6:15p.	it will be finished at 6:15p on Fr	iday, June 16, 2017.	. All course support will
In signing this waiver I agree to be tota 2017.	ally responsible for my own saf	ety and support aft	er 6:15PM on June 16,
Rider/Parent's Signature		D	Oate
Rider/Parent's Signature		D	Oate