

## NOTES

- Parents are encouraged to escort their children around the course
- Aid Station provided at finish line
- All riders are required to be off the course by 10:15am
- All riders are required to wear a helmet that complies with US CPSC safety standards

## **PARTICIPANTS** (First and last name)

Escort/Parent's Name				
Mailing Address	Ci	ty	ST Zip	
Emergency Contact (on-site)			Phone #	
Child 1:	DOB:	Plate#	<b>Distance</b> : O Capital 1	O Captial 4
Child 2:	DOB:	Plate#	Distance: O Capital 1	O Captial 4
Child 3:	DOB:	Plate#	Distance: O Capital 1	O Captial 4
Make check payable to: Epic Rides			\$10 Donation x	child(ren)
All funds raised from the Kic			TOTAL PAID \$	
Nevada State High School C	ycling League			

## **EVENT PARTICIPANT & VOLUNTEER WAIVER of LIABILITY**

Assumption of Risk: I understand that participating in the Carson City Off-Road Endurance Mountain Bike Event exposes me to many hazards and entail 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, promoters and each of their agents, representatives, successors and assigns, and all other persons associated with the event, from all liabilities, claims, actions, or damages that I may have against them arising out of or in any way connected with my participation in this event. 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 understand that the entry fee is non-refundable and non-transferable. 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 the Carson City Off-Road endurance mountain bike event.

## The Carson City Off-Road Capital 1 & 4 events are finished at 10:15am on Sunday, June 17, 2018. All course support will be closed at 10:15am

Parent/Guardian (Please Print)

Parent/Guardian Signature

Date