









April 24 - 26, 2020

May 15 - 17, 2020

June 26 - 28, 2020

October 9 - 11, 2020

First Name	Last Na	me			_ E-I	Mail (requi	red) .		
Street Address				City_				State	Zip
Phone ( )		_ DOB/	Gender	r M	F	Occupat	ion _		
Emergency Contact Name					. Ph	one (	) _		
This waiver is applicable to Junction, Carson City and provide your signature in acliability agreement as it apples Assumption of Risk: I understand, and entails unavoid understand that I should be	I the Oz Trails encknowledgment the plies to your particles tand that particles dable risk of death	durance mount hat you've read icipation in or cipating in an h, personal in	ntain bike even d and understa he of or multipl Epic Rides Se tury (at any lev	ts and of the great the second th	comn follo Ride luran verit	nunity fest wing assur s Series ev ace mounta ty) and los	rivals mptic vents.	. Please re on of risk, ke event e	ad to the bottom and then waiver and release of xposes me to many
Waiver and Release: In conaccident which may occur warm aware of and assume all participants, effect of weath executors, hereby waive, reland owners and managers, and assigns, and all other perincluding but not limited to property damage, which I othereby waive all such claim an approved helmet; that I a has been verified by a licensing	while I am travelided in the same of the s	ng to or from with participal l obstacles of discharge Mo icials, employ with the even easonable atto tors, successor eauses of action and have suffi	the event, duriting in this evenature and concuntain Bike Alees, and agents t, from any anorney's fees arisers or assigns even. I attest that	ng the ont, includitions merica, s, promoder all classing out over may I will p	event udin of ro LLC oters ims, t of b hav artic	t, or while g but not l pads and/o C dba Epic and each actions, lipodily injure in connectipate in this	I am imite r trai Ride of the ability or ection is even	on the pred to falls, ls. I, for mes, the evereir agents, ties, costs, death, or a with part as a bid	emises of the event. I also contact with other yself and my heirs and nt organizers, sponsors, representatives, successor damages, or expenses, tangible or intangible icipation in this event and cycling entrant; I will wear
I understand that this waive otherwise. I understand that above parties to use any pholegitimate purpose. I hereby standards) to access any me event.	er includes any cla t the entry fee is rotographs, videos y grant full permi	aims, whether non-refundable , motion pictu ssion to Mour	e and non-trans ares, website in atain Bike Ame	sferable nages, r rica, Ll	. I he recor LC d	ereby gran dings or a ba Epic R	t full ny ot ides (	permission her record (in accorda	on to any and all of the of this event for any ance with HIPAA
Whiskey Off-Road Course Saturday, April 25th, 2020:						_		ourse supp	port closed at 6:00 p.m.
<b>Grand Junction Off-Road</b> p.m. Saturday, May 16th, 20									rse support closed at 6:00
Carson City Off-Road Coop.m. Saturday, June 27th, 20		-	-				•		support closed at 6:00
Oz Trails Off-Road Cours Saturday, October 10th, 202									apport closed at 6:00 p.m.
In signing this waiver I agreaccording to the times and continues and continues and continues are the same ar			my own safety	and su	ppor	t in one of	or m	ultiple Ep	ic Rides Series events
Rider's Name (Please	Print)								
Rider's Signature									
-									

Emergency Contact Name \_\_\_\_\_\_ Phone \_\_\_\_\_