## 2025 Whiskey Off-Road Professional Race Accident Waiver and Release of Liability

First Name			ne	2		
Email Address			Occupation			
Street Address			City	State/	State/Province	
Zip/Postal Code						
Phone +()				Gender:	M	F
Distance: Women's Fat Tire Crit & B						
Emergency Contact's Full Name			Phone +	_()		
I acknowledge that this athletic event, the potential for death, serious injury, and permperature, weather, condition of athles spectators, coaches, sponsors, landowner isks are not only inherent to athletes but in the Whiskey Off-Road. I realize that I dangerous or defective property owned,	roperty loss. The risks it tes, equipment, vehiculars and agencies, event of t are also present for vehiculability may arise from maintained, or controll	nclude, but are n ar traffic, actions officials, event m blunteers. I hereb negligence or ca ed by them, or be	ot limited to, those of other people inconitors and/or producy agree to assume all relessness on the paceause of their liabil	caused by terrain, dark luding but not limited ucers of the event, and ll of the risks of partici art of the persons or en ity without fault.	cness, facilit to, participa lack of hyd ipating and/ tities being	ties, altitude, ants, volunteers fration. These for volunteering released, from
I certify that I am physically fit, have traperson.	uned sufficiently for pa	rticipating in this	s event and have not	been advised otherwi	se by a qual	lified medical
I acknowledge that this Accident Waiver event in which I may participate and that					rs and organ	nizers of the
In consideration of my application and padministrators, heirs, next of kin, success disability, personal injury, property dam litigation costs, and my traveling to and dba Epic Rides; their directors, officers, staff, vendors, event volunteers and propand all liabilities or claims made as a result (C) Without limitation, the foregoing relembers, managers, agents, representate property traversed or any path, trail, roa	sors, and assigns as fol- age, property theft or ac- from the Whiskey Off- employees, volunteers, perty owners; (B) Inden- sult of participation in ti- ease and indemnity ext- ives, officers, and empl	lows: (A) Waive, ctions of any kind Road, THE FOL, representatives annify and Hold He he Whiskey Off- ends to the owne oyees, and I furth	Release and Dischard which may hereaft LOWING ENTITIE and agents; the ever larmless the entities Road, whether causers of all private projects.	arge from any and all I let accrue to me includes OR PERSONS: Month holders, event direct or persons mentioned ed by the negligence operty traversed during	diability for a ding attorney ountain Bike ors, event spin this para of releasees of the event, a	my death, y's fees, e America, LLC ponsors, event graph from any or otherwise; and all of its
I hereby consent to receive medical trea	tment which may be de-	emed advisable i	n the event of injury	, accident and/or illne	ss during th	is event.
I understand that at this event or related be used for any legitimate purpose by the				gree to allow my photo	o, video or fi	ilm likeness to
This Accident Waiver and Release of Li applicable law.	ability shall be construe	ed broadly to pro	vide a release and w	vaiver to the maximum	permissible	e under
I further agree to abide by all the rules a	nd regulations as set for	rth by Epic Rides	and the director of	this event.		
I hereby grant full permission to Mountainformation recorded regarding my cond			*	HIPAA standards) to	access any i	medical
Course support for the Whiskey Off-Roa Pro backcountry event concludes at 2:00 own safety and support after 7:15 p.m. of	p.m. on Sunday, April	27, 2025. In ack	nowledging this wa			
I hereby certify that I have read this doc	ument and understand i	ts content.				
Note: If 17 or under, signature of parent The undersigned parent and natural guar and hold harmless and indemnify each a imposed upon said parties because of an legal guardian.	rdian or legal guardian of the parties refe	does hereby repre- erred to above fro	om all liability, loss,	claim or damage wha	tsoever whi	ich may be
I HAVE READ THIS RELEASE OF L UNDERSTAND THAT I HAVE GIVE WITHOUT ANY INDUCEMENT.						
Participant's signature		Parent's or Gue	ırdian's signature (i	funder 18 vrs )		
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