



# ENTRY FORM – Katie Ride for Life

Make checks payable to and mail to:  
Katie Ride For Life

98 South Fletcher Avenue, Amelia Island, FL 32034

Register Online  
[www.KatieRideForLife.org](http://www.KatieRideForLife.org)

Rider/Walker No. \_\_\_\_\_

(Assigned at registration)

Date of Event:  
April 17, 2010

**ALL RIDERS MUST WEAR HELMETS**

PRINT NAME \_\_\_\_\_  
First Name Last Name

E-Mail \_\_\_\_\_ TEAM Name: \_\_\_\_\_

Registration ENCLOSED: \$ \_\_\_\_\_ Minimum Donation ENCLOSED: \$ \_\_\_\_\_ Total Amount ENCLOSED: \$ \_\_\_\_\_  
Date of Birth \_\_\_\_\_

AGE (on Event Day) \_\_\_\_\_ SEX: F M SHIRT SIZE: Adult Child S M L XL XXL XXXL (circle one)

CHECK EVENT(S) ENTERING: 100-Mile Century Ride 100 Km 60 Km 30 Km Off-Road Ride

Family Fun Ride Virtual Ride 5Km Walk 10Km Walk

ADDRESS \_\_\_\_\_ APT. \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE/DAY \_\_\_\_\_ PHONE/EVE \_\_\_\_\_

How many Katie Rides / Walks have you participated in? 2005 2006 2007 2008 2009 None

Are you a registered ORGAN DONOR? Yes No Are you or a relative an ORGAN RECIPIENT? Yes No

Are you a member of a DONOR FAMILY? Yes No

For information about organ donation or to register as a donor go to [www.donateliflorida.org](http://www.donateliflorida.org).

**WAIVER:** In consideration of the acceptance of my application for this entry, I, the undersigned intending to be legally bound, hereby, for myself and anyone acting on my behalf, release any and all claims for damages I may have against the Katie Caples Foundation, Katie Ride for Life, YMCA of Florida's First Coast, Performance MultiSports, the event organizers, directors, volunteers and any sponsors and their representatives, successors and assigns for any and all injuries and death suffered by me in said event. I attest and verify that I know that a bicycling event can be a potentially hazardous activity. I acknowledge that participating in this bicycling event is inherently dangerous. I fully realize the dangers of participating in this bicycling event, and fully assume the risk associated with such participation, including but not limited to the following dangers: dehydration, hyperthermia, hypothermia, hyponatremia, collision with pedestrians, vehicles, and other event participants and fixed or moving objects, dangers arising from other surface hazards, equipment failure, inadequate safety equipment, weather conditions, animals, the possibility of serious physical and/or mental trauma and injury, including death. However, I have sufficiently trained for the completion of this event and know that I am participating at my own risk. I understand that there are more hazards than are enumerated here, and that there are unknown and unforeseeable hazards. I engage in the activity of this event with knowledge of the inherent risks of injury. I understand the risks involved in this event and I have carefully read, understand and voluntarily accept the terms of this waiver and release agreement. In addition, I agree to abide by the rules and conditions laid down for the event and to follow instructions issued by event officials. I understand that circumstances beyond the control of the event director may cause the event to be modified, postponed or relocated. I accept that the organizers reserve the right to refuse entry from persons considered to have insufficient experience or disqualify those who fail to follow the rules and conditions: ignorance is no excuse. I agree that my name, voice or picture may be used by Performance Multisports and ride/walk sponsors for promotional purposes. I affirm that the details written about me on this entry form are true. I agree it is my sole responsibility to be familiar with the course, the rules of the sanctioning body, and the special regulations of the event. I have no physical or mental condition which, to my knowledge, would endanger myself or others if I participate in this event, or would interfere with my ability to participate in this event. I have read this waiver of liability and accept the risks and responsibility associated with entering this event. I further acknowledge that I may be required to sign an Acknowledgement, Waiver & Release from Liability (AWRL) during the registration process prior to starting the ride on the day of the event. I hereby grant permission for the free use of my name and picture in any broadcast brochure, website, or account of this event.

Signature \_\_\_\_\_ Parent (if under 18 yrs) \_\_\_\_\_ Date \_\_\_\_\_  
If participant is under 18 years of age, parent or Guardian must sign.