NORTHUMBERLAND HILLS
CYCLING CLUB

Part (A) 2027 "GUEST RIDER" WAIVER

Guests may ride for a maximum of 3 rides, after which a full membership is required.

NAME: _____ **DATE:** _____

PLEASE PRINT CLEARLY

WAIVER, RELEASE AND INDEMNITY

I am aware that by signing this application I am waiving substantial legal rights, including the giving up of my right to sue.

I understand and agree that my participation in events, programs, or activities organized, operated, conducted, and/or sanctioned by the Northumberland Hills Cycling Club ("the Club") is conditional upon my execution of this document.

I am aware that cycling involves the possibility of injury or death, and I accept these risks and all others arising from all events and programs, even if arising from the negligence, gross negligence, or negligent rescue by those associated in any way with the Club, events and programs I may be involved in, the venues at which these events and programs take place or by those organizing, officiating, or participating in these events and programs throughout the year, including their respective officers, directors, employees, sponsors, agents, servants, volunteers and representatives (the "Releasees").

I understand that all applicable rules for participation and the rules, regulations, and by-laws of the Club must be followed and that SOLE RESPONSIBILITY FOR MY PERSONAL SAFETY REMAINS WITH ME, including my physical and emotional preparation and fitness to participate in all events and programs throughout the year, and that I undertake and agree to remove myself from participation if I sense or observe any unusual hazard or unsafe condition, or if, at any time, at any event or program, I feel unable or unfit to safety continue for any reason.

I give, a FULL RELEASE AND WAIVER OF LIABILITY AND ALL CLAIMS that I have, or may have in the future, against the Club, and all other Releasees from all liability for any loss damage, injury or expense that I may suffer as a result of my participation in any part or parts of the events or programs or my presence at any venue at which they may take place, due to any cause whatsoever including the forms of negligence set forth above or from any breach of contract or statutory duty or other duty of care including any duty of care owed under the relevant Occupier's Liability Act, on the part of the Releasees.

I AGREE NOT TO SUE and I further agree TO INDEMNIFY AND SAVE HARMLESS the Releasees from all expenses, fees, liability or damage award or cost of any type whatsoever arising from my participation in these events or programs.

I HAVE READ AND UNDERSTOOD THIS WAIVER, RELEASE AND INDEMNITY. I am aware that by signing this agreement I am waiving substantial legal rights (on my behalf and on behalf of my heirs, executors, administrators and next of kin), including the giving up of my right to sue.

|_____| |_____|

Name (Please Print) Signature

Part (B) EMERGENCY CONTACT INFORMATION

Must be complete both parts (A) and (B) prior to riding

Emergency Contact for: _____
Your name

Name of contact: _____

Relationship to you: _____

Phone number: _____

Alternate phone number: _____

Address: _____

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