

2008 MAYO LAKE CYCLYSM

25K 50K 75K BICYCLE TOUR

SATURDAY, OCTOBER 11, 2008

ROXBORO, NC

Registration Form

First Name _____ MI _____ Last Name _____
Address _____
City, State, ZIP: _____
Telephone _____ Home _____ Work _____
E-mail _____ FAX _____

Date of Birth _____ (Must be age 11 or older) _____ Male _____ Female _____

Employer or School _____

T Shirt Size _____ S _____ M _____ L _____ XL _____ XXL

TEAM INFORMATION

Team Name _____
Team Captain's Name _____
Representing _____ (name of organization)

Fund Raising Goal \$ _____ No Minimum _____ Route _____ 25K _____ 50K _____ 75K

Registration Fee - Includes T Shirt & Lunch for Cyclists

_____ \$25 On or Before September 30, 2008 Early Registration
_____ \$30 On or After October 1, 2008
_____ \$ 5 Raffle for \$500 Gift Certificate from
Dick's Sporting Goods (5 tickets @ \$1 each)
_____ \$ 6 Each - Additional Lunch Tickets for Family / Friends
_____ Total (*Make checks payable to Kiwanis Club of Person County*)

Volunteer _____ I am unable to ride, but would like to volunteer.

EMERGENCY CONTACT INFORMATION

Name _____ Relationship _____
Phone _____ Home _____ Work _____ Mobile _____

CREDIT CARD INFORMATION _____ MasterCard _____ VISA

Name As It Appears on Card _____
Card Number _____ Expiration Date (Month, Year) _____
Total Amount _____ Signature _____
CVS Number _____ (Back of Card)

Mail Completed Form To: _____ Fax Form To: (336) 599-3774
Kiwanis Club of Person County Telephone: (336) 322-3000 H
P. O. Box 1660 Telephone: (336) 599-3116 W
Roxboro, NC 27573 E-Mail: joverton@person.net



Kiwanis Club of Person County
P. O. Box 1660
Roxboro, North Carolina 27573

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Waiver of Liability

Having read this waiver, I, for myself and anyone entitled to act on my behalf, including heirs and assigns, waive and relieve the Kiwanis International Foundation, Kiwanis Club of Person County, Person County United Way, Inc., Person County Recreation Arts and Parks Department, the governing boards, officers and employees of these organizations, corporate sponsors, cooperating organizations and any other parties connected with this event in any way together with their respective successors and assigns from all claims or liabilities of any kind arising out of my participation in the Mayo Lake Cyclysm Bicycle Tour (the "Event") and affiliated training rides even though such claim or liability may arise out of the negligence or carelessness on the part of any person named in this waiver. I, the undersigned, freely acknowledge and realize the dangers of participating in this Event, and fully assume all risks including, but not limited to, collision with pedestrians, vehicles, other riders, and/or fixed or moving objects, and dangers arising from falls, road surface, equipment failures, inadequate safety equipment, weather conditions, as well as the possibility of physical and/or mental trauma or injury.

I do hereby agree that I am physically capable of participating in this event, that my bicycle and any other equipment I may use to participate in the event is in working condition, that I will observe applicable traffic and Event rules and that I will wear a helmet. If I do not follow the rules of the Event, I understand that I may be removed from the Event. I consent to receive medical treatment, which may be deemed advisable in the event of injury or illness during the Event. I give my permission to the Kiwanis Club of Person County and the United Way of Person County, Inc. to use my name, any photographs or any other media including video or any other audio format and the United Way Web site during the course of this event.

I agree to the following Event Rules of the Road

1. Always wear a helmet while riding.
2. Talk to your fellow cyclists. Call out road hazards, on your left when passing, car back, etc.
3. Be predictable. Stay as stable as possible with no sudden unannounced movements. Try to put your self in the eyes of others.
4. Obey all North Carolina traffic laws and regulations. Cyclists are another vehicle on the road and should operate bikes much like driving.
5. Stay to the right half of the lane when possible, passing others on the left only. Never cross the yellow line.

Signature _____ Date _____

Name: _____

Address: _____

Phone number(s): _____

Signature of Parent or Guardian if under 18 years of age:

_____ Date _____

**This form must be signed and returned to Kiwanis Club of Person County
prior to October 11, 2008 in order to participate in this event.**

