



Download and Mail in Registration Form



TOUR D'AMICO JULY 4, 2010

Registration MUST Be POSTMARKED By June 1 For Shirts!

Ages 12 + \$ 27.00 til June 16 \$ 37.00 After # Total \$ (Includes Lunch and Rest Stops)
Ages 6 - 11 \$ 17.00 til June 16 \$ 27.00 After # Total \$ (Includes Lunch and Rest Stops)
HBC Map Clip (Hold That Map) \$ 3.00 # Total \$
Tour D'AMICO Cool Max Socks \$ 6.00 # Total \$ # S ; # M ; # L

Tour D'AMICO T-Shirt - New Design # @ \$16.00 = Total \$ (ck sizes) S, M, L, XL, 2XL, 3XL
This New Design T-Shirt is of Dry-Release Material - It Breathes and will help you stay dry and cool in hot weather (Shirts Run one Size Large)

Tour D'AMICO Jersey - New Design # @ \$60.00 = Total \$ (ck sizes) S, M, L, XL, 2XL, 3XL

Grand Total: (Ride Fees Non-Refundable) Total \$ We RIDE Rain or Shine

Riders: Print Information here, and each rider SIGN at bottom of form

Address: City:

State: Zip Plus 4: Email: [Secure - NO SPAM]

Name: Age: M F Name: Age: M F
Name: Age: M F Name: Age: M F
Name: Age: M F Name: Age: M F

Make check payable to HBC and mail to: TDA
1441 Rocky Lane
Eagan, MN 55122-3807

Mail in Time! Price Increase June 16, 2010

500 RIDER LIMIT RELEASE WAIVER REGISTER EARLY

In consideration of being permitted to participate in any way in the Hiawatha Bicycling Club (HBC) sponsored Bicycling Activities: I for myself, my personal representatives, assigns, heirs, and next of kin :

- * Acknowledge, agree and represent that I understand the nature of bicycling activities and that I am qualified to participate in such activity.
* Further acknowledge that the activity will be conducted over public roads and facilities open to the public during the activity and upon which the hazards of traveling are to be expected.
* Further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the activity.
* Fully understand that :
A. Bicycling activities involve risks and dangers of serious bodily injury, including permanent disability, paralysis and the risk of death.
B. These risks and dangers may be caused by my own actions, or inactions; the actions or inactions of others participating in the activity, the conditions in which the activity takes place, or the negligence of the other participants.
C. There may be other risks and social economic losses, either not known to me, or, not readily foreseeable at this time. I fully accept and assume all such risks, and all responsibility for losses, costs, and damages I incur as a result of my participation in the activity.
* Hereby release, discharge, covenant not to sue, and agree to indemnify and save and hold harmless HBC, the League of American Bicyclists (LAB), their representatives, administrators, directors, agents, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the activity takes place, (each considered one of the participants herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the participants or otherwise, including negligent rescue operations.

* I have read this agreement, fully understand it's terms, understand that I have given up substantial rights by signing it and have signed it freely and without inducement or assurance of any nature, and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law, and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect. I understand Helmets are required.

Name: Age: Date Name: Age: Date
Name: Age: Date Name: Age: Date
Name: Age: Date Name: Age: Date

Parent/Legal Guardian for Riders under Age 18 :

Date: