



2018 Pine Needle Mountain Bike & Music Festival 4 Person Team - Registration Form

Team Name: _____

1st Team Member : _____ Phone: _____

Email Address: _____ Signature: _____

License Number (if you have a 2018 SCA membership): _____ Age: ___ DOB: M ___ D ___ Y ___

2nd Team Member : _____ Phone: _____

Email Address: _____ Signature: _____

License Number (if you have a 2018 SCA membership): _____ Age: ___ DOB: M ___ D ___ Y ___

3rd Team Member : _____ Phone: _____

Email Address: _____ Signature: _____

License Number (if you have a 2018 SCA membership): _____ Age: ___ DOB: M ___ D ___ Y ___

4th Team Member : _____ Phone: _____

Email Address: _____ Signature: _____

License Number (if you have a 2018 SCA membership): _____ Age: ___ DOB: M ___ D ___ Y ___

Registration Fee \$320

Total money raised \$ _____

Payment Options

MasterCard: Visa: Cheque: Cash:

Please make cheques payable to the Pine Needle Mountain Bike Festival

Credit Card Number: _____

Expiry Date: _____ Signature: _____ Name On Card: _____

Registration forms can be mailed to: Fresh Air Experience, 938 Central Avenue, Prince Albert, SK, S6V 4V3 or faxed to (306) 922-6141

You are encouraged to raise pledges for the Festival. The money raised will again go towards a project in Little Red River Park. The Park is the home of the Festival and we want to help improve it, and make it a better place for everyone!

WAIVER, RELEASE & INDEMNITY

I, understand and agree that my participation in above noted event organized, operated, conducted and/or sanctioned by the Canadian Cycling Association and/or Provincial Associations and Various CCA Clubs and Members registered with CCA is conditional upon my execution of this document.

1. I am aware that cycling, and in particular competitive cycling and endurance racing, involves the possibility of injury or death.
2. I accept these risks, and all others arising from this events, even if arising from the *negligence, gross negligence or negligent rescue* by those associated in any way with the **Canadian Cycling Association and/or Provincial Associations and Various CCA Clubs** event I may be involved in, the venues at which this events and programs takes place or by those organizing, officiating, or participating in this event and program, including their respective officers, directors, employees, agents, servants, volunteers and representatives (the AReseases@).
3. I understand that all applicable rules for participation 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.
4. 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 safely continue for any reason.
5. I give, a **FULL RELEASE AND WAIVER OF LIABILITY AND ALL CLAIMS** that I have, or may have in the future, against **Canadian Cycling Association, 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 event or program or my presence at any venue at which they may take place, due to any cause whatsoever including the forms of negligence set forth in paragraph 2 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.
6. 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.
7. 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.

Each team member must sign this registration form and signing it assumes that you fully understand the waiver, release and indemnity above.

PARENTAL CONSENT FOR MINOR PARTICIPANT and INDEMNITY AGREEMENT

I have read and understood the above waiver, release and indemnity, and have discussed the same with the minor person signing above. I am satisfied the said minor understands the waiver and release and his/her obligations as set out. In consideration of the participation of my minor child/ward I too agree to waive, release and indemnify the Releasees in the terms set out above. I am aware that by signing this agreement I am waiving substantial legal rights, which my minor child/ward and I, our respective heirs, executors, administrators and next of kin may have against the Releasees.

SIGNATURE _____ DATE: _____