



Saturday, October 22

8:30 - 10:00 am



ESUMC Bike Ride

Last Name: _____ First Name: _____

☐ Male

☐ Female

Age at time of race: _____

If minor, name of accompanying adult:*

Email address: _____ Phone: _____

Emergency Contact Name: _____ Phone: _____

I hereby waive, release and discharge any and all claims for death, personal injury or property damage which I or my minor child may have, or which may hereafter occur to me or my minor child as a result of my or their participation in the ESUMC Bike Ride. This release is intended to discharge in advance the Johnson City District of the United Methodist Church, First United Methodist Church, Watauga Point United Methodist Church, the City of Johnson City, the City of Elizabethton, and all related individuals and entities of the above from any and all liabilities arising out of or connected in any way with my participation or that of my minor child in this ride. I certify that my level, or that of my minor child, of physical conditioning is appropriate to participate in the ESUMC Bike Ride and there are no known reasons why I, or my minor child, should not participate. I further certify that if I have a minor child participating in the ride, they will be accompanied by myself or a responsible adult that I designate. I understand that serious accidents may occur during the bike ride, and that participants in bicycle events may sustain mortal or serious personal injuries, and/or property damages, as a result of participation. I further understand that I, or my minor child, must wear proper safety equipment, including, but not limited to helmets, during the entire bike ride. I also grant the Johnson City District of the United Methodist Church permission to take and use photographs, audio, video or digital recordings during the event, of myself and/or my minor child, for publicity, promotional and other purposes.

Signature of Entrant

Signature of Parent of Minor

Date

* Adults accompanying minor riders must also be registered for the ride.