Registration Form *ONE RIDER PER FORM*

Name: _____
First Last

Age: _____

Address: _____

City: _____

Province/State: _____

Postal/Zip Code: _____

Phone: _____

E-mail Address: _____
We will not e-mail you more than twice.

Emergency Contact: _____

Emergency Phone: _____

Club You Ride With: _____

How many times have you participated in Le Tour de Norfolk? _____

Routes: Please circle what you think you will ride to help us with our planning.

40km 75km 100km 160km

Registration Fee	$
☐ Men's Jersey ☐ Women's Jersey ☐ XS ☐ S ☐ M ☐ L ☐ XL ☐ 2XL ☐ 3XL	$
☐ Arm Warmers ☐ XS ☐ S ☐ M ☐ L ☐ XL ☐ 2XL	$
TOTAL ENCLOSED	$

Please read and sign the "Release, Waiver & Indemnity".

Mail registration form, signed waiver and cheque or money order (payable to Le Tour de Norfolk) to:

Le Tour de Norfolk
246 Marshall Ave., Delhi ON N4B 1M2

Release, Waiver & Indemnity

PLEASE READ & SIGN

(one form for each rider)

In consideration of the acceptance of my entry, I, for myself, my heirs, executors and administrators, do hereby release and forever discharge Le Tour de Norfolk, and its officials, volunteers, sponsors and any other parties connected with Le Tour de Norfolk event, from all claims for damages, death, personal injury or loss of property, I may have as a result of my participation in Le Tour de Norfolk recreational bicycle ride being held on Sunday, July 16, 2023.

I am aware that the ride may contain some risks, including the risk of falling, collision with other bicycles, motor vehicles or stationary objects, the effects of weather conditions, and the conditions of the road. I voluntarily assume all risks of loss, damage or injury that may be sustained while participating in Le Tour de Norfolk.

I hereby consent to and permit emergency treatment in the event of injury or illness. I attest that I am physically capable and sufficiently trained to ride in Le Tour de Norfolk. I attest that the equipment I will use is in good mechanical condition.

I UNDERSTAND THAT BICYCLE HELMETS CAN PREVENT SERIOUS INJURY AND I AGREE TO WEAR ONE WHILE PARTICIPATING IN THIS EVENT and that at no time will I wear anything such as a baseball cap or headphones that may inhibit the correct use of a properly worn helmet.

I agree to obey all Ontario Highway Traffic Act laws.

I grant my permission to use photographs or recordings of my participation in this event.

I agree not to sue and I further agree to indemnify and save harmless Le Tour de Norfolk, and its officials, volunteers, sponsors and any other parties connected with Le Tour de Norfolk event, from all expenses, fees, liability or damage award or cost of any type whatsoever arising from my participation in this event.

I have read and understand everything written above and I voluntarily sign this agreement.

PLEASE READ AND SIGN THIS FORM. REGISTRATION WILL NOT BE ACCEPTED WITHOUT A VALID SIGNATURE.

I am aware that the event concludes by 4 pm on Sunday, July 16, 2023.

_____
Name of Rider (please print)

_____
Signature of Rider

_____
Date

MINORS: Individuals under the age of 18 must obtain a **SIGNATURE OF A PARENT OR GUARDIAN.** By signing this release, I as a parent or guardian of the minor participant above, hereby give permission for my child or ward to participate in Le Tour de Norfolk and I further agree individually and on behalf of this minor to the terms of this release.

_____
Name of Parent or Guardian (please print)

_____
Signature of Parent or Guardian (if under 18)

_____
Date