



**RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK,
AND INDEMNITY AGREEMENT ("AGREEMENT")**

IN CONSIDERATION for being permitted to participate in any event including all Bicycling Activities ("Activity") organized by Horizon Community Church ("Horizon Bicycle Club") or any of its officers, directors, employees, and agents, I for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of Bicycling Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I 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 travelling are to be expected. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.

2. FULLY UNDERSTAND that: (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING SICKNESS, PERSONAL INJURY, DISABILITY, PARALYSIS AND DEATH ("RISKS"); (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 condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES TO PERSONAL PROPERTY I incur as a result of my participation in the Activity.

3. I HEREBY RELEASE, FOREVER DISCHARGE, AND COVENANT NOT TO SUE the Horizon Bicycle Club, their respective administrators, directors, agents, officers, members, volunteers, 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 "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, INJURIES, SICKNESS OR DEATH, AS WELL AS PROPERTY DAMAGE, OF ANY NATURE WHATSOEVER, WHICH MAY BE INCURRED BY THE UNDERSIGNED during participation in any Activity. This release of liability shall include (without any limitation) any claim of negligence including negligent rescue operations.

4. The participant agrees to INDEMNIFY, SAVE AND HOLD HARMLESS the Horizon Bicycle Club and any one of the RELEASEES herein for any and all claims arising from the individual's participation or as a result of injury during the Activity.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND WITHOUT ANY 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 HAVE READ THIS RELEASE

PARTICIPANT'S SIGNATURE (only if age 18 or over): _____

PRINTED NAME OF PARTICIPANT: _____ DATE: _____

CELL PHONE: _____ HOME PHONE: _____

ADDRESS: _____
(Street) (City) (State) (Zip)



**RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY
AND PARENTAL CONSENT AGREEMENT ("AGREEMENT")**

IN CONSIDERATION for being permitted to participate in any event including all Bicycling Activities ("Activity") organized by Horizon Community Church ("Horizon Bicycle Club") or any of its officers, directors, employees, and agents, I for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of Bicycling Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I 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 travelling are to be expected. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.
2. FULLY UNDERSTAND that: (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING SICKNESS, PERSONAL INJURY, DISABILITY, PARALYSIS AND DEATH ("RISKS"); (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 condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES TO PERSONAL PROPERTY I incur as a result of my participation in the Activity.
3. I HEREBY RELEASE, FOREVER DISCHARGE, AND COVENANT NOT TO SUE the Horizon Bicycle Club, their respective administrators, directors, agents, officers, members, volunteers, 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 "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, INJURIES, SICKNESS OR DEATH, AS WELL AS PROPERTY DAMAGE, OF ANY NATURE WHATSOEVER, WHICH MAY BE INCURRED BY THE UNDERSIGNED during participation in any Activity. This release of liability shall include (without any limitation) any claim of negligence including negligent rescue operations.
4. The participant agrees to INDEMNIFY, SAVE AND HOLD HARMLESS the Horizon Bicycle Club and any one of the RELEASEES herein for any and all claims arising from the individual's participation or as a result of injury during the Activity.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND WITHOUT ANY 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.

PRINTED NAME OF PARTICIPANT: _____ DATE: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF BICYCLING ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

I HAVE READ THIS RELEASE

PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18): _____

PRINTED NAME OF PARENT/GUARDIAN: _____ DATE: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

CELL PHONE: _____ HOME PHONE: _____



EMERGENCY CONTACT INFORMATION

NAME OF PARTICIPANT: _____
(PLEASE PRINT)

FIRST EMERGENCY CONTACT: _____

CELL PHONE: _____ HOME PHONE: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

SECOND EMERGENCY CONTACT: _____

CELL PHONE: _____ HOME PHONE: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

I HAVE CURRENT MEDICAL COVERAGE: YES / NO

INSURER NAME: _____

MEMBER/INSURED ID: _____ PHONE: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

PHYSICIAN NAME: _____

CELL PHONE: _____ HOME PHONE: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

I HAVE READ AND SIGNED THE **"RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT"** AND FULLY UNDERSTAND ITS TERMS AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY.

PARTICIPANT'S SIGNATURE (only if age 18 or over): _____

PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18): _____

PRINTED NAME OF PARENT/GUARDIAN: _____ DATE: _____