

PARENT/GUARDIAN SIGNATURE: (if applicant is under 19 years of age)

Non-Member Day of Insurance Release Agreement

CYCLING BC		
Please print all details clearly below	ı:	
EVENT NAME:	DATE:///	If you DO NOT hold a current CCA/UCI Race Licence or Cycling BC Provincial RIDE License, insurance is required.
	MONTH / DAY / YEAR	Please select type:
LAST NAME:	FIRST NAME:	\$5.00 YOUTH 16 & under
2701177012	11101117.0112.	(DOB after January 1, 2001)
ADDRESS		\$10.00 JUNIOR & ADULT 17 & over
ADDRESS:		(DOB before December 31, 2000)
		\$12.00 OUT-OF-COUNTRY FOREIGN RIDER
CITY:	PROVINCE:	
		have a second and a
POSTAL CODE:	PHONE:	Insurance is valid only for Canadian residents covered under a Federal or Provincial Hospital or Medical Plan.
		Foreign Riders must sign a declaration that adequate out-of-country medical
GENDER:	DIDTILD ATE.	insurance has been obtained and have a race license from their own countr
GENDER.	BIRTHDATE:	of residence.
	YEAR: MONTH: DAY:	Please read, initial, sign and date RELEASE AGREEMENT. If you are under 1
E-MAIL:		years of age, please have your parent or guardian read, initial & date releas agreement.
		Canadian Riders MUST SIGN Part A; Foreign Riders MUST SIGN Part A & Part B
RELEASE OF		PTION OF RISKS AND INDEMNITY AGREEMENT
	(hereinafter referred to as the	"Release Agreement")
BY SIGNING THIS DOCUMENT YOU WILL WA	AIVE OR GIVE UP CERTAIN LEGAL RIGHTS, INCLUDI	ING THE RIGHT TO SUE OR CLAIM COMPENSATION FOLLOWING AN ACCIDENT
PLEASE READ CAREFULLY!	•	
		Cycling Activities (as defined herein) take place, and their respective directors, officers,
		ents, representatives, independent contractors, subcontractors, suppliers, sponsors,
successors and assigns (all of whom are hereina	,	
DEFINITION: In this Release Agreement the term "Cycling Activities" shall include all activities, events, competitions, training rides, tours, programs, workshops, lessons, clinics or other related services, including cross-country, downhill, velodrome (track), Bicycle-motocross (BMX), trials, cyclo-cross or road cycling, which are organized, provided, arranged, conducted, sponsored,		
promoted or authorized by or connected with t		oss or road cycling, which are organized, provided, arranged, conducted, sponsored,
,		to comply with all applicable municipal and provincial highway laws and regulations. I
recognize that serious head injury or death can result even when a helmet is worn.		
ASSUMPTION OF RISKS: I am aware that participation in Cycling Activities involves many risks, dangers and hazards including, but not limited to: changing weather conditions; mechanical		
failure of bicycles; falls; loss of balance; high speed descents; difficulty or inability to control one's speed and direction; rapid or uncontrolled acceleration on hills and inclines; extreme variation in		
cycling terrain including steep or slippery sections, trees, roots, tree stumps, logs, cliffs, rocks, rock drops, loose gravel, holes, depressions, streams and creeks; constructed features such as bridges, ramps, ladders, bumps, berms, jumps, and drops; collisions with natural and constructed objects, other participants, vehicles, pedestrians, spectators and officials; encounters with		
domestic or wild animals; negligence of other persons; and NEGLIGENCE ON THE PART OF THE RELEASEES. I UNDERSTAND THAT NEGLIGENCE INCLUDES FAILURE ON THE PART OF		
THE RELEASEES TO TAKE REASONABLE ST	EPS TO SAFEGUARD OR PROTECT ME FROM THE RI	ISKS, DANGERS AND HAZARDS OF CYCLING ACTIVITIES.
I AM AWARE OF THE RISKS, DANGERS AND	HAZARDS ASSOCIATED WITH CYCLING ACTIVITIES	S AND I FREELY ACCEPT AND FULLY ASSUME ALL SUCH RISKS, DANGERS AND
HAZARDS AND THE POSSIBILITY OF PERSONAL INJURY, DEATH, PROPERTY DAMAGE OR LOSS RESULTING THEREFROM.		
RELEASE OF LIABILITY, WAIVER OF CLAIMS	AND INDEMNITY AGREEMENT	
In consideration of the RELEASEES agreeing to my participation in Cycling Activities either as a member of Cycling BC or as a competitor, course worker, official, volunteer, event organizer, ques		
or member of the media, I hereby agree as follo	, , , , , , , , , , , , , , , , , , , ,	
		RELEASE THE RELEASEES from any and all liability for any injury, loss, damage or expense,
including death, that I may suffer or that my next of kin may suffer, as a result of my participation in Cycling Activities, DUE TO ANY CAUSE WHATSOEVER, INCLUDING NEGLIGENCE, BREACH OF CONTRACT, OR BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, INCLUDING ANY DUTY OF CARE OWED UNDER THE OCCUPIERS LIABILITY ACT, R.S.B.C. 1996, c. 337 ON THE PART OF		
THE RELEASEES. I UNDERSTAND THAT NEGLIGENCE INCLUDES FAILURE ON THE PART OF THE RELEASEES TO SAFEGUARD OR PROTECT ME FROM THE RISKS, DANGERS AND HAZARDS OF		
PARTICIPATING IN CYCLING ACTIVITIES REFERRED TO ABOVE;		
2. TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES for any and all liability for any property damage, loss or personal injury to any third party resulting from my participation in Cycling Activities; 3. This Release Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives, in the event of my death or incapacity;		
4. This Release Agreement and any rights, duties and obligations as between the parties to this Release Agreement shall be governed by and interpreted solely in accordance with the laws of the Province of		
British Columbia and no other jurisdiction; and 5. Any litigation involving the parties to this Release Agreement shall be brought solely within the Province of British Columbia and shall be within the exclusive jurisdiction of the Courts of the Province of British		
Columbia.	<i>J</i> .	·
	lying on any oral or written representations or statements m	nade by the Releasees with respect to the safety of Cycling Activities, other than what is set forth in
this Release Agreement.		
	OUNTRY FOREIGN RIDERS) MUST SIGN PART A:	GNING IT, AND I AM AWARE THAT BY SIGNING THIS RELEASE AGREEMENT I AM
		NISTRATORS, ASSIGNS AND REPRESENTATIVES MAY HAVE AGAINST THE
RELEASEES.		
SIGNATURE:		DATE:
PARENT/GUARDIAN SIGNATURE:		DATE:
(if applicant is under 19 years of age)		
FOREIGN RIDERS MUST ALSO SIGN PART	R.	
I CONFIRM THAT I HAVE ADEQUATE OUT		
SIGNATURE:		DATE: