



GLASSNER

AUTUMN CHALLENGE

2016 MAIL-IN REGISTRATION

One form per rider (PLEASE PRINT CLEARLY)

First Name _____ Last Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Emergency Contact _____ Contact Phone _____

Age: Under 19 (Signature required in last section) 19 and up

Course (choose one): Nutty Nifty Nines (18) Smell the Roses (30) Fabulous Fives (55)
 Mad Metric Century (62) Courageous Century (100)

Registration fee: \$45 (*mailed by* April 8, 2016*) \$50 Regular Registration (*mailed by* September 16, 2016*)
 \$60 Late Registration (*after* September 16, 2016) \$70 On-Site Registration (10/6, 10/7, or 10/8)

Purchase 50% Cotton Blend or Technical T-shirt (After 9/16, Glassner shirts must be purchased for \$14 or \$17):

T-Shirt Size(s): XS S M L XL (\$14 each for XS - XL) XXL (\$17) XXXL (\$17)

T-Shirt Fabric: 50% Cotton Blend Technical Tee (Polyester with 3M Moisture Wicking)

* *Note: Registration on or before September 16, 2015 includes one free T-shirt with your \$45 or \$50 registration fee.*

Make checks payable to: Montgomery Bicycle Club

The event will take place rain or shine. If weather becomes too severe, it will be cancelled for the safety of all riders. No refunds will be issued. All profits will still go to cycling safety and awareness.

WAIVER AND RELEASE OF LIABILITY

For the sole consideration of being permitted to participate in the "Jim Glassner Memorial Autumn Challenge" thereafter referred to as "The Event", I, intending to be legally bound, hereby release and forever discharge the Montgomery Bicycle Club, Inc. and each of its officers, servants, agents, employees, volunteers, members, their heirs and personal representatives, and all advertisers, sponsors and supporters of the Event and, if applicable, the owners and lessors of premises on which any part of, or any event associated with or related to the Event takes place, and all other persons firms and corporations liable, or who might be claimed to be liable (each considered to be on of the "Releasees" herein), from any and all claims, demands, damages, actions, causes of action, or suits of any kind and nature whatsoever, on account of any and all injuries both to my person and to my property, which may result from, or may in the future develop from, my participation in or traveling to and from the Event.

I understand that the Releasees are not responsible for, and are not insurers of my personal safety during the Event. I also understand that bicycling is an inherently dangerous activity and that the Event is conducted on roads that will be open to the public and that vehicles will be traveling on those roads during the Event. I fully realize and appreciate the dangers of participating in an organized bicycle ride. I realize that the Event requires physical conditioning and I represent that I am in proper physical condition to participate in the Event. I fully assume any and all risks associated with my participation in the Event, including, by way of example only and not in limitation, risks of personal injury, mental injury, emotional stress, trauma, death, contact with other participants or animals, equipment failure, inadequate safety equipment, the effects of weather (including extreme temperature or conditions), traffic, contact with motor vehicles of all types and descriptions, collision with other riders, pedestrians or fixed or moving objects, and the conditions of the road. I agree to follow all applicable traffic laws and wear and ANSI or SNELL approved helmet at all times while riding my bicycle.

I have completely read this release and I understand and accept the terms of it. I understand that the purpose of the release is to release all entities associated with the Event from any and all claims on account of any injury I might sustain during the event and that by signing this release I have given up substantial rights.

Signature _____ **Date** _____

RIDERS UNDER THE AGE OF 19 OR LEGALLY INCAPACITATED

I understand that if I am not of legal age, i.e. if I am under 19 years old, or if I am otherwise legally incapacitated, my parent(s) or legal guardian(s) have fully read the Waiver and Release of Liability and my parent(s) or legal guardian(s) fully understand(s) it and understands that I am fully bound by their signature.

Parent or Guardian (If under 19) _____ **Date** _____

Mail Registration form and check/money order to:
Montgomery Bicycle Club
Glassner Autumn Challenge
135 Catoma Street #4652
Montgomery, AL 36104-3401