2016 BATAVIA LIONS CLUB BIKE TOUR REGISTRATION FORM

25 Mile Ride	e 50 Mile Ride
FIRST NAME:	LAST NAME:
ADDRESS:	
HOME PHONE:	WORK PHONE:
Email:	
DATE OF BIRTH:	AGE as of June 11, 2016
You must be 16 or over to participate. Anyone under 16 must be accompanied by a parent, grandparent or guardian.	
NAME OF PARENT / GUARDIAN:	
RELATIONSHIP:	
physically fit and will have trained sufficiently to parti- your participation in the case of medical issues that ** I agree to observe all the rules of the road and act in during the bicycle tour. ** I agree to allow the Batavia Lions Club to use any lik ** In consideration of the acceptance of my registration dependents and heirs and their directors, officers an Club, their sponsors, and their directors, employees jointly and severally and hold and save them harmle damage, injury or expense of any kind, including law Bike Tour, whether from negligence of the organizers ** I certify that, unless indicated otherwise by the signa of age on June 11, 2016.	ne Batavia Lions Club Bicycle Tour to be conducted on ms and agrees to the following: nelmet at all times when on the bike. us physical activity and endurance and confirm that I am icipate. The Batavia Lions Club reserves the right to restrict could affect your safety. In a way as to be responsible for my own safety at all times seness of me participating in the Bicycle Tour. In to the Batavia Lions Club Bicycle Tour, and on behalf of my and representatives, I release and discharge the Batavia Lions officers and agents (collectively referred to as the organizers) are from any and all actions, claims, liabilities, demands, loss by yer's fees which may result by reason of participating in the
SIGNATURE OF GUARDIAN:	DATE:
(if participant is under 16 years of age)	

Mail to: The Batavia Lions Club, P.O. Box 456, Batavia, NY 14021. Checks Payable to Batavia Lions Club.

Registration fee prior to May 15th, \$30. May 15th to the day of the event, \$35.