Primavera Century — 46th Annual - April 20, 2019 Mail-In Registration Form <u>Must be postmarked by Dec 31, 2018</u>

First Name:	Last Name: _	Age (on Apr 20, 2019)			
Address:		Check One:	Complete Century 100 miles	\$65	
City & Zip:			85 Mile Ride	\$65	
Email Address:		_	The Perfect Metric 100k	\$65	
Contact Phone Number:		_	The 25 mile Fun Ride – Adults	\$30	
Emergency Phone Number:		The 25 mile Fun Ride - Under 16 \$15			
Vegetarian? Y/N		(One registration form per person, please) TOTAL:			
	Make check payable	e to FFBC and	send to:		
FFBC/P	rimavera 2019, P.O	. Box 1868, F	remont, CA 94538		
PARENTAL CONSENT RELEASE AN ("AGREEMENT")	ND WAIVER OF LIABILITY,	ASSUMPTION OF	RISK, AND INDEMINITY AGREEMENT	,	
IN CONSIDERATION of being permitted to p personal representatives, assigns, heirs, and n		reewheelers Bicycle Clu	b ("club") sponsored Bicycle Activities ("Activity")	I for myself, my	
participate in such Activity. I further acknowle	edge that the Activity will be conduc	cted over public roads a	t I am qualified, in good health, and proper physic and facilities open to the public during the Activity o ans to be unsafe, I will immediately discontinue furth	and upon which	
DISABILITY, PARALYSIS AND DEATH ("R participating in the Activity, the condition in	ISKS"); (b) these Risks and dange which the Activity takes place, or T SES either not known to me or not t	ers may be caused by a THE NEGLIGENCE OF readily foreseeable at th	OF SERIOUS BODILY INJURY, INCLUDING my own actions, or inactions, the actions or inac THE "RELEASEES" NAMED BELOW; (c) there n is time; and I FULLY ACCEPT AND ASSUME ALL tion in the Activity.	ctions of others may be OTHER	
and, if applicable, owners and lessors of prem DEMANDS, LOSSES, OR DAMAGES ON M "RELEASEES" OR OTHERWISE, INCLUDIO LIABILITY, ASSUMPTION OF RISK, AND IN	nises on which the Activity takes pla MY ACCOUNT CAUSED OR ALL NG NEGLIGENT RESCUE OPER NDEMNITY AGREEMENT I, or any	nce, (each considered on EGED TO BE CAUSE ATIONS; AND I FURD one on my behalf, make	gents, and employees, other participants, any sponso he of the "RELEASEES" herein) FROM ALL LIABII ID IN WHOLE OR IN PART BY THE NEGLIGE THER AGREE that if, despite this RELEASE ANI s a claim against any of the Releases, I WILL INDE liability, damage, or cost which any may incur as th	LITY, CLAIMS, ENCE OF THE D WAIVER OF EMNIFY, SAVE,	
4. I am in advance giving my permission and Activity.	l approval for others as in item (3) o	above in the capacity to	provide support to me and my bicycle before, durin	g, and after the	
RIGHTS BY SIGNING THIS AGREEMENT, H	HAVE SIGNED IT VOLUNTARILY A DNAL RELEASE OF ALL LIABILIT	AND WITHOUT ANY IN Y TO THE GREATEST I	EMENT, UNDERSTAND THAT I AM GIVING UP . VDUCEMENT OR ASSURANCE OF ANY NATURE EXTENT ALLOWED BY LAW. I AGREE THAT IF A ONTINUE IN FULL FORCE AND EFFECT.	E AND INTEND	
Signature of Participant (only if over	18)	Print Name		Date	
MINOR RELEASE					
CAPABILITIES AND BELIEVE THE MINO. ACTIVITY. I HEREBY RELEASE, DISCHA. RELEASE'S FROM ALL LIABILITY, CLAIMS, OR IN PART BY THE NEGLIGENCE OF TH DESPITE THIS RELEASE, I, THE MINOR, O	R TO BE QUALIFIED, IN GOOD RGE, COVENANT NOT TO SUE, , DEMANDS, LOSSES, OR DAMAC IE "RELEASES" OR OTHERWISE, DR ANYONE ON THE MINOR'S BI SS EACH OF THE RELEASES FRO	O HEALTH, AND IN F AND AGREE TO IND GES ON THE MINOR'S INCLUDING NEGLIG EHALF MAKES A CLAI	CYCLING ACTIVITIES AND THE MINOR'S EXPIPOPER PHYSICAL CONDITION TO PARTICIPALEMNIFY AND SAVE AND HOLD HARMLESS EN ACCOUNT CAUSED OR ALLEGED TO BE CAUS. ENT RESCUE OPERATIONS AND FURTHER AGM AGAINST ANY OF THE RELEASES NAMED A EXPENSES, ATTORNEY FEES, LOSS LIABILITY,	ATE IN SUCH EACH OF THE EED IN WHOLE GREE THAT IF, ABOVE, I WILL	
Signature of Parent or Guardian (Only if participant is under the age of 1	8)	Print Name		ate	

(only if participant is under the age of 18)