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

First Name:Last Nam		e: <b>Age</b> (on Apr 20, 2019)		
Address:		Check One:	Complete Century 100 miles	<b>\$70</b>
City & Zip:			85 Mile Ride	<b>\$70</b>
Email Address:		-	The Perfect Metric 100k	<b>\$70</b>
Contact Phone Number:		_	The 25 mile Fun Ride – Adults	s <b>\$30</b>
<b>Emergency Phone Number:</b>			The 25 mile Fun Ride - Under	16 <b>\$15</b>
Vegetarian? Y/N		(One registration form per person, please) TOTAL:		
	Make check payable	e to FFBC and	send to:	
FFBC/	Primavera 2019, P.O	. Box 1868, F	remont, CA 94538	
PARENTAL CONSENT RELEASE A ("AGREEMENT")	AND WAIVER OF LIABILITY,	ASSUMPTION OF I	RISK, AND INDEMINITY AGREEMEN	
IN CONSIDERATION of being permitted to personal representatives, assigns, heirs, and		reewheelers Bicycle Club	("club") sponsored Bicycle Activities ("Activity"	") I for myself, my
participate in such Activity. I further acknow	vledge that the Activity will be conduc	cted over public roads an	I am qualified, in good health, and proper phy: d facilities open to the public during the Activity s to be unsafe, I will immediately discontinue furi	y and upon which
DISABILITY, PARALYSIS AND DEATH ("participating in the Activity, the condition in	'RISKS"); (b) these Risks and dange n which the Activity takes place, or T PSSES either not known to me or not r	ers may be caused by m THE NEGLIGENCE OF T readily foreseeable at this	OF SERIOUS BODILY INJURY, INCLUDING y own actions, or inactions, the actions or in I'HE "RELEASEES" NAMED BELOW; (c) there s time; and I FULLY ACCEPT AND ASSUME A on in the Activity.	actions of others e may be OTHER
and, if applicable, owners and lessors of pre DEMANDS, LOSSES, OR DAMAGES ON "RELEASEES" OR OTHERWISE, INCLUE LIABILITY, ASSUMPTION OF RISK, AND	emises on which the Activity takes pla MY ACCOUNT CAUSED OR ALL DING NEGLIGENT RESCUE OPER. INDEMNITY AGREEMENT I, or any	nce, (each considered one EGED TO BE CAUSEL ATIONS; AND I FURTI one on my behalf, makes	ents, and employees, other participants, any spon of the "RELEASEES" herein) FROM ALL LIAI O IN WHOLE OR IN PART BY THE NEGLIC HER AGREE that if, despite this RELEASE Al a claim against any of the Releases, I WILL IND ability, damage, or cost which any may incur as	BILITY, CLAIMS, GENCE OF THE ND WAIVER OF DEMNIFY, SAVE,
4. I am in advance giving my permission ar Activity.	nd approval for others as in item (3) o	above in the capacity to p	rovide support to me and my bicycle before, dur	ing, and after the
RIGHTS BY SIGNING THIS AGREEMENT,	HAVE SIGNED IT VOLUNTARILY A IONAL RELEASE OF ALL LIABILITY	AND WITHOUT ANY IN Y TO THE GREATEST E	MENT, UNDERSTAND THAT I AM GIVING U. DUCEMENT OR ASSURANCE OF ANY NATUR XTENT ALLOWED BY LAW. I AGREE THAT IN NTINUE IN FULL FORCE AND EFFECT.	RE AND INTEND
Signature of Participant (only if ove	r 18)	Print Name		Date
MINOR RELEASE				
CAPABILITIES AND BELIEVE THE MIN ACTIVITY. I HEREBY RELEASE, DISCH RELEASE'S FROM ALL LIABILITY, CLAIM OR IN PART BY THE NEGLIGENCE OF T DESPITE THIS RELEASE, I, THE MINOR,	OR TO BE QUALIFIED, IN GOOD ARGE, COVENANT NOT TO SUE, IS, DEMANDS, LOSSES, OR DAMAS, THE "RELEASES" OR OTHERWISE, OR ANYONE ON THE MINOR'S BE ESS EACH OF THE RELEASES FRO	D HEALTH, AND IN PA AND AGREE TO INDE GES ON THE MINOR'S A INCLUDING NEGLIGE EHALF MAKES A CLAIM	YCLING ACTIVITIES AND THE MINOR'S EX. ROPER PHYSICAL CONDITION TO PARTICI EMNIFY AND SAVE AND HOLD HARMLESS CCOUNT CAUSED OR ALLEGED TO BE CAU. RIT RESCUE OPERATIONS AND FURTHER A M AGAINST ANY OF THE RELEASES NAMED XPENSES, ATTORNEY FEES, LOSS LIABILIT	IPATE IN SUCH EACH OF THE USED IN WHOLE AGREE THAT IF, DABOVE, I WILL
Signature of Parent or Guardian (Only if participant is under the age of	18)	Print Name		Date

(only if participant is under the age of 18)