

Silver Comet Trail Ride: Memorial Day Weekend (May 24-25) All fields must be completed. All forms and monies are due by May 1, 2015 Email questions to: help@davekrache.com

<u>Please note: The short route (slow group) will cover roughly 65 miles (13 - 15 mph avg.) both days.</u> <u>Please note: The short route (fast group) will cover roughly 65 miles (16 - 18 mph avg.) both days.</u> <u>Please note: The long route (fastest group) will cover roughly 90 miles (18 - 20 mph avg.) both days.</u>

Registration Form

Last name:	First name:
Address:	
Phone number:	Email address:
Emergency contact name and phone n	umber:
(Requested jersey and t-shirt sizes only	XXL XXXXL T-Shirt Size: S M L XL XXL XXXL guaranteed to first 40 registries received on or before March 1. Castelli jerseys sure of what size you need, please visit Cycology Bike Shop to try one on.)
Rider's signature:	Date:
(All minors must be accompanied by a	under 18) parent or guardian)
Leave and return from Rockmart	(SLOW GROUP) – estimated 65 miles each day (13 - 15 mph avg.). (FAST GROUP) – estimated 65 miles each day (16 - 18 mph avg.). Bike Shop (FASTEST GROUP) – estimated 90 miles each day (18 - 20 mph avg.).
 SAG stops with snacks, water, a Hotel room (double occupancy Dinner (Sunday night) Breakfast (Monday morning) Photographs shot by Matt Gide Community support leading up Transportation of overnight ba Option to schedule on-site mass 	dens Digital to and on the day of the ride

Your participation will help kids receive bikes and be able to enjoy the sport of cycling.

Drop off your registration form, this payment form, waiver, and check made payable to The Dave Krache Foundation to:

Cycology Bike Shop 4484 Jimmy Lee Smith Parkway Hiram, GA 30141

Or

Mail to: The Dave Krache Foundation/Cycology Bike Shop SCT ride c/o Allison Giddens 1635 Old 41 Hwy NW, Ste 112-236 Kennesaw, GA 30152

Registration	BEFORE	March 6:	: \$175.00) =	

Registration AFTER March 6: \$200.00 =

Number of additional door prize tickets: _____ x \$10.00 = _____

Number of additional attendees for dinner: _____ x \$15.00 = _____

Add \$50.00 if you would like your own hotel room: _____

Additional donation to The Dave Krache Foundation (tax-deductible): _____

Total: _____

Please make out checks to The Dave Krache Foundation. Put "Bike Ride" in the memo line.

Credit cards are also accepted. Please note that a 5% surcharge will apply for credit card transactions.

Name on card

Credit card number _____

Exp Date _____ Security Code _____

You will be notified once The Dave Krache Foundation has processed your registration form. Rider bags and jerseys can be picked up from Cycology Bike Shop. You will be notified when they are available.

Cycology Bike Shop/DKF Use Only:					
Date Received:	RECEIVED: Page 1 of application				
Time:	Page 2 payment info Payment method Check #				
Initials:	Signed waiver				

THE DAVE KRACHE FOUNDATION/CYCOLOGY BIKE SHOP 2015 SILVER COMET TRAIL CHARITY BIKE RIDE

WAIVER AND RELEASE OF LIABILITY

(READ BEFORE SIGNING)

The undersigned hereby acknowledge that by signing this Agreement, they are assuming risks and agreeing to indemnify, not to sue, and agreeing to release from liability The Dave Krache Foundation and Cycology Bike Shop, its subsidiaries, affiliates, officiers, officials, agents, employees, leaders, volunteers, agents, sponsoring agencies, sponsors, members, participants, clubs, teams, riders and if applicable, owners and lessor's of premises used for activities (hereinafter collectively referred to as "Releasees"). It is further understood that the undersigned are giving up substantial legal rights.

In consideration of my voluntary participation in this Dave Krache Foundation/Cycology Bike Shop event, the undersigned voluntarily makes the following agreements. The undersigned acknowledge that the sport of cycling, is an inherently dangerous sport, including but not limited to dangers associated with man-made obstacles or natural surface hazards, trees, logs, vegetation, water, pot holes, rocks, cold weather, extreme heat, rain, other bicycles, other riders, pedestrians, vehicles, fixed or moving objects, equipment failure, inadequate safety equipment, and use of equipment or materials provided. Safety equipment includes the use of a safety helmet, which the undersigned have selected and which satisfies one of the ride requirements The Dave Krache Foundation/Cycology Bike Shop have mandated for all participants, to protect against serious head injury.

The undersigned ACKNOWLEDGE AND FULLY ASSUME THE RISKS associated with participating in activities, as listed above and including the Releasees' own negligence and the negligence of others. The undersigned fully understand that cycling activities include the potential for serious physical injury, permanent paralysis and/or mental injury, disability or death, loss or damage to person or property associated with presence or participation in the activity. The undersigned understand that particular skills, equipment and personal discipline may reduce the risks, but that risk of serious injury exists.

The risks include, among other things: the dangers of collision with pedestrians, vehicles, other riders, and fixed or moving objects; the dangers arising from surface hazards, including trail irregularity, equipment failure, inadequate safety equipment, use of equipment provided by The Dave Krache Foundation/Cycology Bike Shop or others; motor vehicle accidents; the releases own negligence; the negligence of others; weather conditions; the possibility of serious physical and/or mental trauma or injury, or death associated with this event; slipping and falling; falling objects; water hazards; drowning; exhaustion; exposure to temperature and weather extremes which could cause: hypothermia, hyperthermia (heat related illnesses), heat exhaustion, sunburn, dehydration; and exposure to potentially dangerous wild animals, insect bites, and hazardous plant life.

On behalf of self, spouse, heirs, executors, administrators, legal representatives, assignees, and successors in interest (hereinafter collectively "Successors"), the undersigned hereby RELEASE, INDEMNIFY AND HOLD HARMLESS the Releasees. The undersigned hereby waive any and all rights and claims, including claims arising from the Releasees' own negligence, which the undersigned has, or which may hereafter accrue, and from any and all damages which may be sustained by the undersigned directly or indirectly in connection with, or arising out of, participation in or association with the events, including any activities incidental thereto, wherever or however the same may occur.

The undersigned participant agrees that it is their sole responsibility to be familiar with the event course and agenda and the Releasees' rules and any special regulations for the event. The undersigned agree to comply with Releasees' rules and regulations/stated and customary terms and conditions for participation. The undersigned participant agrees to ride and otherwise participate so as to neither endanger myself nor others. If the undersigned participant observes any unusual significant hazard during my presence or participation, the participant will remove themselves from participation and bring to the attention of the ride leader, said hazard immediately. The undersigned participant accepts full responsibility for the condition and adequacy of my equipment or any equipment provided for use. The undersigned

participant agrees to wear a helmet, which satisfies the requirements of Releasees' rules and regulations, the purpose of which is to protect against serious head injury, and the undersigned assume all responsibility and liability for the selection of such a helmet.

The undersigned participant hereby certifies that I have no physical or medical condition which would endanger myself or others, or interfere with my ability to safely participate in this event.

The undersigned agree, for self and successors, that the above representations are contractually binding, and are not mere recitals. The undersigned understand that if claims are made against Releasees that the undersigned will be responsible for any costs and fees incurred by Releasees in defending the claims.

This Agreement may not be modified in any way, and not orally. This Agreement shall be effective for injuries now or which may hereinafter occur in the future, whether known or unknown.

The undersigned hereby agrees to hold harmless any and all Releasees, from any liability for ordinary negligence.

The undersigned hereby expressly agree that this Release and Waiver is intended to be as broad and inclusive as permitted by the laws of the State of Georgia and that if any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I have read the above carefully before signing and understand its terms, including giving up substantial legal rights.

Dated

Signature of Participant

Printed Name

Date of Birth

Home Phone #

CONSENT AND RELEASE OF PARENT OR LEGAL GUARDIAN

I am the parent or legal guardian of _______ (Participant). My child is fit for participation in the sport of cycling. I have read and understand the above Agreement, and agree to the Release of Liability as set forth above. In consideration of allowing my child to voluntarily participate, I consent to the Agreement and its terms shall likewise be binding on me, my child, my heirs, legal representatives and assignees. I hereby, for myself, my child and my heirs, HEREBY RELEASE, INDEMNIFY, and HOLD HARMLESS the Releasees, whether or not arising from the negligence of the Releasees.

I hereby release for myself and my child, and shall defend, indemnify and hold harmless the Releasees from any and all claims of liability that I or my child may allege against Releasees, (including reasonable attorney fees and costs), as a direct or indirect result of injury or death due to my child's participation in the activities offered by Releasees, whether caused by the negligence of the Releasees or others.

I have read the above carefully before signing and understand this waiver.

Dated

Signature of Parent or Legal Guardian

Printed Name

General Rules and Regulations

- The ride is rain or shine.
- You must be able to ride, unassisted, the full distance (of your chosen route) on Sunday, and the full distance on Monday at the scheduled average pace. As a general rule, if you can to ride by yourself at the posted group pace you should sign up for that ride. If on the other hand you are not sure, or it would be a stretch to maintain the faster riding pace, please choose a slower group. This should be an enjoyable ride, we are not trying to break any land speed records. If you have any questions about which group to choose, please talk with Ira & Mike at Cycology Bike Shop. They will be happy to help with the decision making process.
- All riders must wear their helmet at all times while riding. No exceptions.
- All riders under the age of 18 must be accompanied by a parent or guardian.
- The long route (18 20 mph avg.) will begin and end at the Cycology Bike Shop parking lot. You may park there overnight. Riders depart at 8:30am Sunday.
- Both short route options will begin and end at the Rockmart trailhead Gazebo. You may park there overnight. When you check in we will point you to the designated parking area. Riders in the slower group (13 15 mph avg.) will depart at 8:30am. Riders in the faster group (16 18 mph avg.) will depart at 9:00am Sunday.
- There will be a dinner provided on Sunday night after all riders have checked in to the hotel. If you have particular dietary restrictions, we will do our best to accommodate. Please contact Allison at <u>allison@davekrache.com</u> no later than April 1, 2015.
- You will be contacted via email the week before the ride with final details.
- Water and snacks will be provided at SAG stops during the ride each day. It will be important to wear your wristband at all times so volunteers at the station know you are a participating rider.
- There will be door prizes given out on Sunday night at the dinner. Each registered rider will receive one ticket. To increase your chances of winning, additional tickets can be purchased before the ride via The Dave Krache Foundation and also at Cycology Bike Shop. Additional tickets can also be purchased at the hotel during dinner.
- The Dave Krache Foundation has the right to refuse a person from participating for any reason.
- There will be opportunities to schedule an on-site massage at the hotel Sunday evening after the ride. Each massage will be 15 minutes and will cost \$20 (the first massage will start at 7:00 pm and the last massage will start at 9:40 pm). You are able to book multiple slots together for a longer massage. For more information, please contact Ira Hochberg at <u>ira@cycologybikeshop.com</u> or Allison at <u>allison@davekrache.com</u>. As there are a limited number of appointment slots, we expect that this will book up quickly. If interested please reserve your spot today. All massages must be paid in full before the session will start.
- Please Note: Our hotel is located in a "Dry County". If you wish to arrange for a friend or family member to bring alcohol, that is acceptable. As your luggage will be limited to a small overnight bag, and volunteers have limited transportation space, Cycology Bike Shop, The Dave Krache Foundation and our volunteers will not transport alcohol from the ride starting point to the hotel for you.
- If you are unsure what to take on the ride, or unsure how to prepare, please stop in to Cycology Bike Shop. Ira and Mike will be happy to help you prepare!
- Patronize your sponsors! They've made this happen!