

ROAN MOAN MAIL-IN REGISTRATION

Name _____ Telephone _____ - _____ - _____

Address _____

City: _____ St./Prov. _____

Zip code _____

E-mail _____

Emergency Contact _____

and phone number _____ - _____ - _____

T-shirt size: S___ M___ L___ XL___ XXL___

T-shirts are only guaranteed for preregistered riders!

Please enclose payment in check or money order.

Fee: \$30 before July 1, \$45 after. Payment enclosed \$_____ Today's date _____

I plan to ride the: _____Century _____Metric Century _____35 mile Roan

_____Check here for vegetarian meal

How did you find out about the Roan Moan? _____

Read Carefully...

I am aware that certain risks and dangers exist in cycling including but not limited to:

Wet, slippery, and rough road surfaces, traffic hazards, and acts of nature. Injury or death is possible in any cycling event. I do hereby assume all of the above risks and release the Bakersville Volunteer Fire Dept, their agents, employees, and associates from any and all liability, actions, debts, claims, and demands of every kind and nature whatsoever which I now have or which may arise out of or in connection with my ride or participation in it.

The terms hereof shall serve as a release, indemnification, and assumption of risk for my heirs, executor, and administrators for all members of my family, including any minors accompanying me.

I understand that helmets are required at all times while cycling on the course.

Signature _____

Parent or legal guardian must sign for riders under 18.

Print name of parent or guardian: _____

MAIL TO:
Bakersville Fire Dept.
PO Box 351
Bakersville, NC 28705