

Kettle Moraine Optimist Ride Minor Registration Form  
For students under the age of 18 on September 12, 2009

Please print or photocopy one registration form per adult rider.  
Make checks payable to: UWW/Community Optimist Club

Please mail the completed form and signed waiver and check in the amount of **\$15 prior to 9/12/09 and \$17 after 9/12/09 or on day of event to:**

UWW/Community Optimist Club  
Attn: KMOR  
P.O. Box 571  
Whitewater, WI 53190

Anticipated Mileage (please circle)	18 miles	35 miles	64 miles
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**ALL REGISTRANTS MUST READ, UNDERSTAND AND SIGN THIS RELEASE.**

In signing this form I \_\_\_\_\_ (PRINT NAME) understand and agree that the UWW/Community Optimist Club and its sponsors, organizers, directors, volunteers or assigns be they individuals or organizations, singly and collectively are not responsible for my personal health or safety. I further understand that accidents occasionally occur during bicycle riding, and that participants occasionally suffer mortal or serious injury and/or property damage as a consequence thereof. Knowing these risks I do hereby ABSOLVE AND HOLD HARMLESS THE UWW/COMMUNITY OPTIMIST CLUB AND ITS SPONSORS, ORGANIZERS, DIRECTORS, VOLUNTEERS OR ASSIGNS OF ALL BLAME OR LIABILITY FOR ANY INJURY, MISADVENTURE, HARM, LOSS, OR INCONVENIENCE SUFFERED AS A RESULT OF TAKING PART IN THE KETTLE MORaine OPTIMIST RIDE OR IN ANY OF THE ACTIVITIES ASSOCIATED WITH SAID EVENT. I further agree to WEAR A CERTIFIED BICYCLE HELMET WHILE RIDING MY BICYCLE and to abide by the traffic laws and regulations of the State of Wisconsin.

**Minor Release Form**

**THE PARENT OR LEGAL GUARDIAN OF THE REGISTRANT(S) MUST READ, UNDERSTAND AND SIGN THIS RELEASE.**

I \_\_\_\_\_ (PRINT NAME) am the parent or legal guardian of:

Print Name \_\_\_\_\_ Age on Sept 27, 2008: \_\_\_\_\_

Print Name \_\_\_\_\_ Age on Sept 27, 2008: \_\_\_\_\_

Print Name \_\_\_\_\_ Age on Sept 27, 2008: \_\_\_\_\_

Print Name \_\_\_\_\_ Age on Sept 27, 2008: \_\_\_\_\_

Print Name \_\_\_\_\_ Age on Sept 27, 2008: \_\_\_\_\_

As the parent or legal guardian I understand and agree that the UWW/Community Optimist Club and its sponsors, organizers, directors, volunteers or assigns be they individuals or organizations, singly and collectively are not responsible for my child's/children's personal health or safety. I further understand that accidents occasionally occur during bicycle riding, and that participants occasionally suffer mortal or serious injury and/or property damage as a consequence thereof. Knowing these risks I do hereby ABSOLVE AND HOLD HARMLESS THE UWW/COMMUNITY OPTIMIST CLUB AND ITS SPONSORS, ORGANIZERS, DIRECTORS, VOLUNTEERS OR ASSIGNS OF ALL BLAME OR LIABILITY FOR ANY INJURY, MISADVENTURE, HARM, LOSS, OR INCONVENIENCE SUFFERED AS A RESULT OF TAKING PART IN THE KETTLE MORaine OPTIMIST RIDE OR IN ANY OF THE ACTIVITIES ASSOCIATED WITH SAID EVENT. The above named minor(s) further agree(s) to WEAR A CERTIFIED BICYCLE HELMET WHILE RIDING THEIR BICYCLE and to abide by the traffic laws and regulations of the State of

Wisconsin.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

Printed Name	Signature	
Street Address	Unit/Apt/Suite	
City	State	Zip Code
Phone:	Email:	
Rider's Age on 9/27/08:	Emergency Contact Name & Number (please print)	