

Kettle Moraine Optimist Ride Adult Registration Form

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 **\$25.00 prior to 9/12/09, \$29.00 after or on day of the 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.

Printed Name		Signature	
Street Address		Unit/Apt/Suite	
City	State	Zip Code	
Phone:		Email:	
Rider's Age on 9/12/09:		Emergency Contact Name & Number (please print)	