

Release & Waiver

I understand the inherent risks of bicycle riding and agree to abide by all applicable local highway, trail or other posted rules, and further consent to wear an ANSI or SNELL approved bicycle helmet at all times while riding my bicycle. I hereby waive all claims against the Warren County Chamber of Commerce, the County of Warren and its municipalities as well as respective officers, directors, employees, sponsors, representatives and volunteers from any and all liability, including attorney's fees, that may result from illness, personal injury, property damage as a result of my participation in the First Saturday Cycle Tour ("Event").

Indemnification. You are to indemnify and hold the Warren County Chamber of Commerce, the County of Warren and its municipalities and its officers and employees harmless from any claim or demand, including reasonable attorney's fees, made by any third party due to or arising out of your registration and participation in this Event or the violation of any term of this Liability Waiver.

Applicable Law, Consent to Jurisdiction. You agree that exclusive jurisdiction for any dispute with the Warren County Chamber of Commerce, the County of Warren and its municipalities resides in the Courts of the State of Georgia and you further agree and expressly consent to the exercise of personal jurisdiction in the Courts of the State of GA in connection with any dispute including any claim involving the Warren County Chamber of Commerce, the County of Warren and its municipalities or its employees, officers, directors, sponsors, representatives and volunteers.

Severability. If any provision of this Liability Waiver shall be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Liability Waiver and shall not affect the validity and enforceability of any remaining provisions.

Signature of Participant (cyclist)

If you are under 18 years old, the following must be signed by your parent or guardian:

I, being the parent or legal guardian of the above entrant, who is under the age of eighteen (18) years, having read and understood this complete waiver, do hereby consent that the above mentioned entrant may participate in the First Saturday Cycle Tour.

I do hereby adopt entirely the above "Waiver".

Parent or Guardian (PRINT)

Parent or Guardian (SIGNATURE)

First Saturday Cycle Tour

May 3, 2008

Registration: 7:30-8:00 AM
Pre ride briefing: 8:00 AM
(No mass start)

Rest Stops Provided
Helmets Required

12, 26, 50 or 100 Mile Ride
Rolling Hills—Moderate Terrain



www.warrencountyga.com

First Saturday Cycle Tour

May 3, 2008

Registration:

7:30-8:00 AM

Pre-ride briefing: 8:00 AM

(No mass start)

Registration: Send in pre-registration form to Hometown Warrenton, Inc., PO Box 27, Warrenton, GA 30828. Same-day registration will be on May 3rd. .

Fee: \$20.00. Make checks payable to Hometown Warrenton, Inc. and mail to above address or bring to same-day registration.

Proceeds: Proceeds from the event go to Hometown Warrenton, Inc., a non-profit that supports the local Mentoring Program, the Early-Read Program, and family events downtown.

T-shirts & Goody Bags: Included in registration fee for the first 40 participants. Maps of the routes will be provided in the ride-packet on May 3rd. .

Course: The race will start and finish in front of the Warren County Court House at 521 Main Street, Warrenton, GA 30828, and the course will run throughout Warren County.

Course Lengths: Three ride lengths are 12, 26, 50 and 100 miles.

Rest Stops: Drinks and snacks will be provided for the 26, 50, and 100 mile routes.

Time: Check-in, packet pick-up and registration begins at 7:30a.m. at the Warren County Court House.

Volunteers: If anyone traveling with you would like to volunteer, they will receive a \$5 gift certificate to be used at the local businesses.

More info: Dennis Neal (706) 465-2781 or Cindy Rivers (706) 465-9604. Or email: events@warrencountyga.com

To Register....

Return your completed Registration Form, signed Waiver (see reverse), and payment information to:

Hometown Warrenton, Inc.
PO Box 27
Warrenton, GA 30828
706.465.9604

Make checks payable to Hometown Warrenton, Inc.

First and Last Name

Age

Birth date (M/D/Y)

Mailing Address

City/State/Zip

Telephone

Email address

Emergency Contact Name and Phone

Is your emergency contact on the ride? Yes / No

Additional Registrants (at same address)

First and Last Name

Age

Birth date (M/D/Y)

S M L XL

Shirt Size

First and Last Name

Age

Birth date (M/D/Y)

S M L XL

Shirt Size