



Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, ST, Zip \_\_\_\_\_  
Telephone: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Age: \_\_\_\_\_

**Participants in The Fun Fund bike ride must read and sign in ink, the following waiver form:**

**Safe & Considerate Riding Agreement:**

Riding safely and considerately is vital to the safety and enjoyment for all riders. The future of cycling events in Colorado depends on your cooperation in following safe cycling practices.

I agree to the following:

- Wear a helmet at all times while riding.
- Always carry personal identification.
- Obey all traffic regulations, signs and lights.
- Ride as far to the right side of the road as practical.
- Ride single file except to pass when possible.

1. Signature \_\_\_\_\_  
(parent or guardian if under 18)

Date: \_\_\_\_\_

**Release and Waiver Statement:**

In consideration of the acceptance of my entry, I, the undersigned participant, for myself, my family members, heirs, administrators, personal representatives, successors and assigns hereby fully release, discharge and hold harmless The Fun Fund, Diana VanDenBerg, Larimer County, the City of Fort Collins, any sponsors, owners and operators of motor vehicles and officers, directors, employees, volunteers and lessors of any of the foregoing persons or entities from any and all liability, whether resulting from negligence of any aspect of the The Fun Fund Events, whether a pre-ride, post-ride activity or the ride itself. I also expressly covenant with the aforementioned persons and entities not to sue any such persons and entities for any such activity, including the negligence of any such persons or entities. I certify and represent by my application for entry that my physical condition is adequate to participate safely in The Fun Fund and I hereby acknowledge that the above persons and entities have no obligation to provide medical care and have not undertaken the responsibility to do so. In the event that I receive medical care as a result of a medical emergency, I hereby consent to such care and fully release the person(s) providing such care from any and all liability, whether resulting from negligence or otherwise. I authorize and consent to persons employed or contracted by The Fun Fund, whether by videotape, film, newsprint, written advertisement, or otherwise, of any materials containing my name or picture and I release any sponsors and all persons acting under authority from any claims I might have due to initial or subsequent publication of any such materials or photographs. I hereby certify that I have fully read and understand the foregoing release, waiver and covenant not to sue, and sign it voluntarily. I also agree to abide by all traffic laws and to wear a helmet at all times during the ride.

2. Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(parent or guardian if under 18)