



Registration Form – Raven’s Revenge Bike Ride

(Must be completed by **EACH RIDER**)

Last Name: _____ First Name: _____

Gender: Male -Female Age _____ Address: _____

City: _____ State: _____ Zip: _____ Email: _____

T-shirt size: (circle) S M L XL XXL
Route: (circle) 10* 20* 33* 51** 61**

Riders under 13 must be with adult. / 51 and 61+ mile rides you must be 18 or older.

Emergency Contact: _____

Emergency Contact Phone: _____

Entry Fees:
Individual \$35.00 \$ _____
Family \$65.00 \$ _____

Make checks payable to: **Huntsville Lions Club Mail**
Mail registration form to: **Raven Revenge Ride**
c/o Huntsville Lions Club
P.O. Box 67
Huntsville, TX 77342

Waiver-March 10, 2012 Ride

(Must be completed by EACH RIDER)

In consideration of accepting my registration, I, for myself, heirs and personal representatives, assume full and complete responsibility for any injury, accident or damage done to my person or party which may occur during my participation in The Raven’s Revenge Ride or while I am on the premises of this event, and hereby release and hold harmless The Lions Club Huntsville Chapter, the National MS Society and the Lone Star Chapter, and any other sponsors, promoters and all other persons or entities associated with this event from any and all injury, damage or expense suffered by me whether it be caused by my own negligence or any other and all entities associated with this event or events or employees or otherwise. In addition to the absolute and unqualified release from all liability, I hereby represent that I am physically capable of participating in this event, that my bicycle and other equipment I may use to participate in this event are in working order, that I observe all applicable traffic and event rules, that I will use a helmet and generally conduct myself in a safe and prudent manner while participating in the event and I hereby absolve and hold harmless all and any parties or entities associated with The Raven Revenge Ride from any damage that I may sustain because of any breach of these representations. I hereby consent to and permit emergency treatment in the event of injury or illness while participating in the event. I also hereby give permission to The Raven Revenge Ride to use my name and any pictures/videos taken of me during the event in any promotional materials, publications or on the Internet. In the event of an accident I further give medical personnel permission to release my name to ride officials.

Signature of rider _____ Date _____

Parent or guardian must sign if entrant under 18 years of age

