

BAMC MENOMINEE RIVER CENTURY REGISTRATION FORM

ONLY 1 REGISTRANT PER FORM (MAY PHOTOCOPY) – PLEASE PRINT

When you register, your name and city will be listed on the MRC web site.
If you do not want to be listed, check the box on the registration form.

Name _____
LAST FIRST

Street _____

City / State / Zip _____

Phone _____

E-mail Address: _____
(E-MAIL ADDRESSES USED ONLY FOR MRC UPDATES)

DO NOT list my name on the MRC Web Site

T-SHIRT SIZE: SM MED LG X-LG XX-G Child Medium

ROUTE I PLAN TO RIDE: 15 km 40 km 80 km 120 km

Registration before June 15 (includes T-shirt) \$28 _____

Registration before June 15 (no T-shirt) \$20 _____

Registration after June 15 (no T-shirt) \$25 _____

Kids 12 and Under (no T-shirt) \$10 _____

Kids in Carts Free _____

Family Fun Ride (15K) (no T-shirt) \$5 Per Person _____

T-Shirt *(Availability and size selection on day of ride may be limited)* \$10 _____

Total Enclosed (Fees are not refundable) \$ _____

Bicycling is a potentially hazardous activity and that serious injuries or death can occur from accidents, negligence or carelessness. I understand that I should not participate nor allow any minor for whom I am responsible to participate if we are not in good health and in proper physical condition. I am voluntarily participating in this event and agree to assume all risks associated with participating in this event, including, but not limited to, illness, injury, falls, contact with other participants, effects of the weather, traffic and conditions of the road, all such risks being known and appreciated by me.

In consideration of your accepting my registration, I release Menominee River Century and all of the cooperating sponsors, groups, agencies or municipalities, their representatives and successors, from all claims or liabilities of any kind arising out of my participation in this event, even liability arising out of negligence or carelessness on the part of the event organizers and other people or organizations supporting this event.

If I am the parent or legal guardian of a minor participant, I also release and agree to indemnify all of the above released parties from all claims or liabilities of any kind on the minor's account incurred in connection with BAMC Menominee River Century or its related events and activities, including liability arising out of negligence or carelessness on the part of the event organizers and other people or organizations supporting this event.

I agree that route markings and maps are provided for my convenience only and not to guarantee a safe route.

I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

I will wear a bicycle helmet and exercise bicycle safety while riding in the 2010 BAMC Menominee River Century.

PARTICIPANT'S SIGNATURE

PARENT OR GUARDIAN IF UNDER 18

Please return advance registration form and check (made out to Bay Area Medical Center) to:
BAMC Menominee River Century • P.O. Box 601 • Menominee, MI 49858

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