

Release of Liability – Read Before Signing

In consideration of being allowed to participate in any way in the **Southwest Cycling Specialists** program(s), its related events and activities,

I, _____, the undersigned, acknowledge, appreciate, and agree that:
Print Name

1. The risk of injury from the activities involved in bicycling and physical activity in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist.
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation. I agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the Company immediately. I understand and agreed that, if at any time, I feel anything to be UNSAFE, I will immediately take all precautions to avoid the unsafe area and REFUSE TO PARTICIPATE further.
3. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMINFY, AND HOLD HARMLESS **SOUTHWEST CYCLING SPECIALISTS, Paul Walton**, their officers, officials, volunteers, Agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and/or tenant(s) of premises used for the activity ("Releasees"), WITH RESPECT TO ANY ALL INJURY, DISABILITY, DEATH, or lose or damage to person or property associated with my presence or participation, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
4. I agree to comply with all laws that apply to cycling and also agree that to participate in these activities I am required to wear an approved cycling helmet at all times. I understand that my bicycle and equipment must be in a safe and working condition to participate in these activities. I understand that there may be unforeseen road hazards, weather, terrain conditions, vehicular traffic, and actions of other people that could cause injury. **I hereby assume all of the risks of participation and responsibility for my own actions.**
5. **I hereby agree that I am in proper and safe physical condition to participate in these activities and that I have NO physical or medical condition that would not allow me or hinder me from safely participating in these activities. I understand that I should check with my doctor/physician before starting any physical activity.**

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OR RISK AGREEMENT, FULLY UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT AND INDUCEMENT.

x _____
Participants Signature Print Name

Address: _____ Date Signed: ____/____/____
City State Zip

Age: _____

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINOR AGE

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my child and our heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

x _____
Parent/Guardians Signature Print Name

Address: _____ Date Signed: ____/____/____
City State Zip