



Waiver and Release: I hereby, for myself, my heirs, my executors and administrators, waive any and all rights and claims for damages I may have against Revolution Bike Shop, HERevolution Multisport, VeloFit Revolution, sponsors, coordinating groups, and any associated individuals, their representatives, successors and assigns, and will hold them harmless for any and all injuries and/or damages suffered in connection with group bicycle rides organized by Revolution Bike Shop, HERevolution Multisport, and/or VeloFit Revolution . I have been warned that bicycling is a dangerous sport and that I must be in good health to participate in these rides. I must obey all traffic laws and it has been recommended to me that I should wear a helmet while participating in these rides event. In filling out this form I acknowledge I have read and fully understand my own liability and do accept the restrictions.

X \_\_\_\_\_  
Signature of participant (or signature of parent/guardian if under 18 years old)

Age \_\_\_\_\_ Date \_\_\_\_\_  
Signature of participant