

Bike-Boat-Bike: June 7, 2009

Registration Form

Please submit **SEPARATE** application for EACH participant. Photo-copies accepted.

LAST NAME		FIRST NAME				
STREET NAME						
CITY or TOWN		STATE	ZIP CODE			
EMAIL						
EMERGENCY CONTACT NAME AND PHONE						
PLEASE CIRCLE YOUR INTENDED RIDE	25 (Remote)	25	50	65	100	125

League Of American Bicyclists ("LAB") and Suffolk Bicycle Riders Association ("SBRA") Release And Waiver Of Liability, Assumption Of Risk and Indemnity Agreement ("Agreement")

IN CONSIDERATION of being permitted to participate in any way in Suffolk Bicycle Riders Association (SBRA) ("Club") sponsored Bicycling Activities ("Activity") I, for myself, my personal representatives, assigns, heirs, and next of kin:

(1) ACKNOWLEDGE, agree, and represent that I understand the nature of Bicycling Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further acknowledge that the Activity will be conducted over public roads and facilities open to the public during the Activity and upon which the hazards of traveling are to be expected. I further agree and warrant that if, at any time, I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.

(2) FULLY UNDERSTAND that (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH ("RISKS"); (b) these risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the conditions in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I may incur as a result of my participation in the Activity.

(3) HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the Club, the LAB, its respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

I AM 18 YEARS OF AGE OR OLDER, HAVE READ AND UNDERSTAND THE TERMS OF THIS AGREEMENT, UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING THIS AGREEMENT, HAVE SIGNED IT VOLUNTARILY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW. I AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT. (1-2007)

PARTICIPANT'S SIGNATURE _____ DATE _____

MINOR RELEASE (COMPLETE BELOW ONLY FOR PARTICIPANTS UNDER THE AGE OF 18)

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF BICYCLING ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

MINOR'S NAME (PRINTED): _____

MINOR'S SIGNATURE: _____ MINOR'S BIRTH DATE: _____

PARENT/GUARDIAN NAME (PRINTED): _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

29th Annual Bike-Boat-Bike

Presented by the Suffolk Bicycle Riders Association

Sunday, June 7, 2009 • Rain or Shine

SBRA invites you to cycle Long Island's East End Tour through the woodlands, fields, and shoreline of the North and South Forks. Cycle through the scenic coves and byways of Shelter Island. Whether your preference is social, scenic viewing, or fast recreational cycling, we are sure you will enjoy the tour. Bike-Boat-Bike has flat to gently rolling routes, along with some hills on Shelter Island.

Location: Capital One Headquarters, Mattituck N.Y.

Suggested Departure Times

Routes:	25 miles:	Easy Flat/North Fork/Horton Pt. Lighthouse	9:30 A.M.
	* 25 miles:	Remote Start/Shelter Island (Hilly) Register at Capital One Headquarters, pick up T-shirt, registration bracelet and cue sheets. Then drive to the remote start at Greenport High School	9:00 A.M.
	* 50 miles:	North Fork/Extended Shelter Island	8:30 A.M.
	* 65 miles:	North & South Forks/Shelter Island	8:00 A.M.
	* 100 miles:	North & South Forks/Shelter Island/Hampton	7:30 A.M.
	* 125 miles:	North & South Forks/Shelter Island/Montauk Pt.	7:00 A.M.

Fee/Registration: \$30 – DAY OF EVENT REGISTRATION

\$25 – MAIL-IN REGISTRATION

\$20 – ONLINE REGISTRATION AT ACTIVE.COM (PLUS ACTIVE.COM FEE)

Bring Active.com receipt at check-in.

Children under 12 are half-price but MUST be accompanied by parent or guardian.

*Registration does NOT include ferry fare. Please bring \$10 in singles. Exact ferry fares will be posted at registration table.

Tour Provides:

FREE event T-shirt to the FIRST 400 pre-registered riders (size not guaranteed), T-shirts must be claimed at check-in, unclaimed T-shirts will be available for sale after the ride.

There will be maps, cue sheets, registration bracelets and marked roads. Rest stops along each route provide food and refreshments until 4:30 PM. SAG support vehicles will assist BRACELETED RIDERS until 5:00 PM.

Directions:

Take the Long Island Expressway (Route 495) east to the end. Follow the signs to Orient Point. Stay on Route 25 to Mattituck, Capital One. Headquarters will be on the left side of the road.

Requirements:

All registrants must sign a release form. Participants under 18 years of age MUST be accompanied by a parent or guardian. All riders must wear an approved helmet (ANSI or SNELL). Cycling safety and strict adherence to all state cycling laws and rules of the road are imperative. We suggest you carry identification and any pertinent medical information with you at all times. Bicycles should be in good working order.

If you have additional questions visit www.sbraweb.org

MAIL REGISTRATION: Fill out the Registration Form, include a non-refundable check for \$25.00 made out to SBRA, and mail to SBRA-BBB, 37 Franklin St., Brentwood, NY 11717.