



RELEASE AGREEMENT

Youth Bike Programs:

CASCADE BICYCLE CLUB AND CASCADE BICYCLE CLUB EDUCATION FOUNDATION

In consideration of the acceptance of my child (or minor participant) into the CASCADE BICYCLE CLUB EDUCATION FOUNDATION'S YOUTH BIKE PROGRAMS and by signing this release for my child (or minor participant), I agree to RELEASE, HOLD HARMLESS, AND INDEMNIFY Cascade Bicycle Club, Cascade Bicycle Club Education Foundation and all of Cascade's sponsors, and all of the respective officers, agents, members, employees, and volunteers and all states, counties, cities, and facilities in which this event is held, and any other parties connected with this bicycle event for any injury, loss, or damage suffered as a result of participation in this bicycle event, including injury, loss, or damage caused by negligence of any party.

I understand and agree that neither Cascade Bicycle Club, Cascade Bicycle Club Education Foundation, its officers or agents, nor the instructors(s), or other volunteers, may be held liable in any way for any occurrence or accident in connection with said event, and I further agree to save and hold harmless the Cascade Bicycle Club, its officers and agents, and the instructor(s) from any claim by me, my family, estate, heirs or assigns arising out of my child's participation in this event.

I understand that there are certain risks associated with bicycle riding, including the risk of serious personal injury or death, and I expressly agree to my child (or minor participant) assuming these risks. I warrant that my child (or minor participant) is a sufficiently competent cyclist to handle participation in the Event.

I also warrant that my child (or minor participant) is physically fit enough to participate in this event and that **I accept full responsibility for all medical expenses incurred as a result of my child's (or minor's) participation. I agree to HOLD HARMLESS and INDEMNIFY the entities named above for any claims brought on behalf of the minor.**

I understand that wearing a helmet that meets bicycle safety standards, CPSC, SNELL, ANSI, or ASTM, can minimize head injuries that may occur in a cycling accident and that Cascade Bicycle Club requires all riders to wear helmets. I agree that my child (or minor participant) will wear a helmet at all times while participating in this event. It is my sole responsibility to ensure that my child's helmet meets CPSC, SNELL, ANSI, or ASTM standards.

I give permission for Cascade Bicycle Club and Cascade Bicycle Club Education Foundation to use my child's image in any future club material should it appear in photos or videos taken during this event.

Any legal action that may arise from my child's (or minor's) participation in this event will be handled in the State of Washington according to Washington State law.

MY SIGNATURE GUARANTEES THAT I HAVE READ THIS DOCUMENT AND UNDERSTAND IT.

[NAME OF PARTICIPANT]

[AGE]

[NAME OF PARENT/GUARDIAN OF MINOR PARTICIPANT]

[DAYTIME PHONE]

[EVENING PHONE]

[EMAIL: for future events & camps]

[SIGNATURE OF PARTICIPANT OR PARENT/GUARDIAN OF MINOR PARTICIPANT] Date: _____

Consent for medical care and treatment of a minor: by signing above I authorize medical treatment for the minor registering and agree to be responsible for any costs associated with such treatment.