SHENANDOAH FALL FOLIAGE BIKE FESTIVAL, INC.

2023 Registration, Release and Assumption of Risk





NAME	
ADDRESS	
CITY/STATE/ZIP	
PHONE	
EMAIL	
AGE (ID REQUIRED IF UNDER 18)	
Please check one: ☐ First Time Attendee ☐ Returnee	REGISTRATION FEES
If new, how did you hear about this event? ☐ Postcard ☐ Facebook ☐ Website (shenandoahbike.org) ☐ Bike Shop ☐ Friend ☐ Other:	Rider Fees □ Adult (age 18+) May 15–July15 \$125 \$ □ Adult July 16–Sept. 15 \$145 \$
Emergency Contact	□ Adult Sept. 15 – Walk-in*\$165 \$
NAME	Family-Friendly Discount
PHONE Will your Emergency Contact be on the ride? □ Yes □ No	 □ Youth (6-17: Riders under 18 must be accompanied by an adult at all times.)
T-shirt Size (adult sizes only) Please check one: □ S □ M □ L □ XL □ XXL □ 3XL	Non-rider Spouse (optional: includes T-shirt and wristband for meals
Type of Riding (Note: you are not bound to this choice, it helps us plan SAG)	and rest stops)\$40
30-mile □ Saturday □ Sunday Metric □ Saturday □ Sunday Century □ Saturday Gravel Route (fat tire) □ Saturday □ Sunday	Camping on-site ☐ I will camp = \$20 per tent* \$ ☐ Sleep in gym = \$20 per family* \$ ☐ RV (25ft max.) = \$25 per RV* \$ ☐ I do not require accommodations.
NOTE: Bike Jackets, Jerseys and other products are handled outside of the registration process and must be ordered online at ShenandoahBike.org. You will have an option to pay by credit card or by mailing in a check.	*Camping fees are per family unit in same tent (or gym floor). 5th wheels and motorhomes restricted to 25-ft max length or shorter with no hookups. Please visit shenandoahbike.org for all camping rules/regulations regarding noise restrictions and Sunday exit time. *Do not mail this form after Oct. 10, 2023 as it may not arrive in time for processing.
	TOTAL: \$

COMPLETE AND SIGN THE BACK SIDE AND

MAIL WITH PAYMENT TO:

Fall Foliage Bike Festival P.O. Box 3267, Staunton, VA 24402

Send CHECK or CASH only.

Credit Cards are accepted for on-line registration only at https://shenandoahbike.org.

2023 Release and Assumption of Risk

<u>Signature necessary for participation</u> (Use one form per person).



I, the undersigned, freely acknowledge and realize the dangers of participating in the FFBF, and fully assume all risks including, but not limited to, collision with pedestrians, vehicles, other riders, and/or fixed or moving objects, the negligence of other riders, sponsors, promoters or drivers, and dangers arising from falls, road surface, equipment failures, inadequate safety equipment, weather conditions, as well as the possibility of physical and/or mental trauma (or injury). I understand that any route or activity chosen as a part of our outdoor adventure may not be the safest, but has been chosen for its interest or challenge. I understand that the route requires bicycling on public roadways and in bad weather and that cyclists have been hospitalized and/or killed because of traffic mishaps that are either their responsibility or others' responsibility. I further agree that I will bear all expenses incurred in any such accidents.

I realize that the FFBF requires physical conditioning and represent that I am in sound medical condition. I have no physical or medical impediment, which would endanger myself or others. I understand and agree that a situation may arise during the Fall Festival which may be beyond the control of the sponsors, promoters or organizers and agree to ride so as not to endanger either myself or others.

I will wear a certified bike helmet when riding a bike during the FFBF. I will obey all Virginia traffic laws and regulations. I understand if I leave the route I am no longer on the ride. I agree that my photograph, video or voice may be used in the promotion or advertising for the Shenandoah Fall Foliage Bike Festival with no compensation due.

COVID-19 POLICY • I attest that to the best of my knowledge:

- I do not have COVID-19 at the time of attending this FFBF event.
- I also attest that I have not knowingly been in contact with or exposed to any known carrier of COVID-19 within the past 14 days.
- I agree that I will not knowingly expose others to any illness I may have or be at risk to have.
- I will follow City, County and/or State guidelines with respect to COVID-19 that have jurisdiction in the area in which the FFBF
 event is taking place.
- If any of the above should change prior to my arrival at the FFBF event or during my participation in the FFBF event that is the subject of this consent, I will inform FFBF and proceed accordingly in light of the new information.
- I agree that I am attending this FFBF event entirely at my own choice and assume all risk and full responsibility for my own health, wellbeing, and safety.
- I agree that FFBF(board members, members, and their designees) is in no way liable for any present or future COVID-19 exposure incurred at any time by any person, in attendance or not in attendance, during or after this FFBF event.

Further, I hereby indemnify and hold harmless FFBF (board members, members, and their designees) from all COVID-19-related claims by or liability to any third party arising out of my participation in the FFBF event. Any liability to anyone for any COVID-19 incident involving myself or the actions of other participants will be my sole responsibility. I assume all financial liability and assume all and any financial costs associated with my actions.

The above agreements and representations are my express understanding of the risks and I assume these voluntarily and freely without coercion or duress. This agreement may not be modified orally and may not be waived in any respect. I accept the responsibility for the condition and adequacy of my bicycle and agree to abide by the rules of the FFBF relating to wearing a helmet, riding single file, wearing an identification tag as well as other organization requirements.

Date:	, 2021	
Signature:		
Printed Name:		
Parent/Guardian Release		
EVERYONE UNDER EIGHTEEN (18) YEARS OF AGE MUST HAVE THE FOLLOWING COMPLETED. I, as parent or guardian of the above named minor, hereby give my permission and consent voluntarily and freely for my child to participate in the Fall Festival. I further agree individually and on behalf of my child to the above terms after having read the "Fall Festival Release and Assumption of Risk."		
Date:	, 2023	
Signature of Parent/Guardian:		
Printed Name of Parent/ Guardian:		