

SHENANDOAH FALL FOLIAGE BIKE FESTIVAL, INC.

2024 Registration, Release and Assumption of Risk

PLEASE USE ONE FORM PER PERSON AND COMPLETE BOTH SIDES



NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____

EMAIL _____

AGE _____ (ID REQUIRED IF UNDER 18) MALE FEMALE

Please check one: First Time Attendee Returnee
If new, how did you hear about this event? Postcard
 Online Search Website (shenandoahbike.org) Bike Shop
 Friend Other: _____

Emergency Contact

NAME _____

PHONE _____

Will your Emergency Contact be on the ride? Yes No

T-shirt Size (adult sizes only, not available on Child 5 and Under Ticket)

Please check one: S M L XL 2XL 3XL

Type of Riding (Note: you are not bound to this choice, it helps us plan SAG)

30-mile/26-mile Saturday Sunday

Metric Saturday Sunday

Century Saturday

Gravel Route (fat tire) . . . Saturday Sunday

PRODUCTS: Bike Vests, Jerseys and Socks are sold through our website by credit card purchase only. You will have an option to pay by credit card, check or cash in-person at the Festival sales table. Pre-order reservations on the new jersey design can only be made through advance online purchase.

REGISTRATION FEES

Rider Fees

Adult (age 18+) May 15–July 15 . . . \$125 \$ _____
 Adult July 16–Sept. 15 \$145 \$ _____
 Adult Sept. 15 – Walk-in* \$165 \$ _____

Family-Friendly Discount

Youth (6-17: Riders under 18 must be accompanied by an adult at all times.) \$40 \$ _____
 Child (5 and under: Riders under 5 must be helmeted and on a bike with an adult.) **Free**
 Non-rider Spouse (optional: includes T-shirt and wristband for meals and rest stops) \$40 \$ _____

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.

***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, 2024 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>.

2024 Release and Assumption of Risk



Signature necessary for participation (Use one form per person).

In consideration of my participation, I waive, release, discharge for myself, my heirs, executors, administrators, legal representatives (including successors), any and all rights and/or claims which I have, may have or may hereafter accrue to me against the sponsors, promoters and organizers of the Shenandoah Fall Foliage Bike Festival, Inc. dba as the Fall Foliage Bike Festival (hereafter known as FFBF), or other sponsors or affiliated organizations and their respective agents, officers, employees and volunteers for any and all damages, injuries or claims which may be sustained by me directly or indirectly arising out of my participation in the Fall Festival.

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 / INFECTIOUS DISEASE 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: _____, 2024

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: _____, 2024

Signature of Parent/Guardian: _____

Printed Name of Parent/ Guardian: _____