

28th Annual

WILDERNESS ROAD RIDE Saturday, May 25, 2019



FIRST NAME	LAST NAME			AGE	
ADDRESS	CITY		STATE	ZIP CODE	
EMAIL			PHONE NUMBER		
EMERGENCY CONTACT NAME	EME	RGENCY CONTACT PHONE		SEX (circle) M F	
Entry Fees Youth (up to 17) \$35 through 4/15/19, \$40 thereaft Adults (age 18+) \$45 through 4/15/19, \$50 thereaft Family of 3-5 \$105 through 4/15/19, \$120 thereaft	ter	Route 29 Mile 38 I Rules: * Riders under 16 must be accor * Riders under 8 must have perm * ANSI or Snell Certified helmets * To complete your registration,	mpanied by an adul nission from the Ev are required.	t. ent Director.	
Make checks payable to FCAE. Mail completed form to: FCAE-SWVA c/o M. Long P.O. Box 21035 Roanoke, VA 24018		agreement below. This registration form represents your agreement to read and familiarize yourself with all registrationmaterials and to follow all procedures and rules. Please arrive early for Event Day registration - 7:00am. Closes at 8:30am Please Support our sponsors!!			

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("AGREEMENT")

In consideration of participating in the WILDERNESS ROAD RIDE, I represent that I understand the nature of this Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the Activity. This includes my minor children that may be invloved in the Activity.

I fully understand that this Activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releasees" named below; and that there may be other risks 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 incur as a result of my participation in the Activity.

I hereby release, discharge, and covenant not to sue **THE FELLOWSHIP OF CHRISTIAN ATHLETES (FCA)**, its respective administrators, directors, agents, officers, 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, waiver of liability, and assumption of risk 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 loss, liability, damage, or cost which any may incur as the result of such claim.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, ANDINDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it be a complete and unconditional release of all liability to the greatest extend allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

__ May 25, 2019 ______ May 25, 2019























