

SPAN the Rockies Mail-In Registration Form – Valid Until August 12, 2010

Name: _____
Address: _____
City/State/Zip: _____
Email: _____
Phone (home): _____
Phone (cell): _____
Birth Date: _____
Emergency Contact Name: _____
Emergency Contact Number: _____



Please Note

- One rider per form.
- Please print clearly.
- Mail by 8/4/10 to ensure receipt by 8/11/10.
- You must sign the waiver on the back of this form to participate in the ride.
- Mail form and payment to:
SPAN
835 North Street
Boulder, CO 80304

Did you ride SPAN the Rockies in 2009?

Yes No

(Riders from STR 2009 are eligible for membership in the Founder's Club and receive special promotions and extra event goodies!)

1. SELECT YOUR ROUTE:

200K * 130K * 75K * Flat Tired – Donation Only
*Must be 14+ on August 15, 2010.

2. SELECT YOUR REGISTRATION TYPE:

Registering as:

Individual Team – each member must submit a registration form

Team Name: _____ Team Captain Name: _____

Team Category: Small Business/Group (≤49 employees/members)
 Large Business/Group (≥50 employees/members)
 Family/Community Group

3. INDICATE YOUR REGISTRATION CATEGORY:

Early Bird Registration –
Must be received by 6/1/10

All Routes - \$75

Flat Tired – Not
Riding/Donation Only
Accepted Through 8/15/10

Donation Amount: _____

Event day registration is also available for \$115.00.

5. CHOOSE JERSEY (OPTIONAL): Limited Quantity – Cannot Guarantee Size Availability. Jerseys are "pro-fit"

SPAN the Rockies Jersey - \$60 each Quantity: _____

Size(s): Unisex XS S M L XL XXL

Note: Women's equivalent for women's sizing is one size down. Example: Women's Medium is Unisex Small (All jerseys are pro fit for a slightly more fitted cut).

I will pick up my jersey with my packet. Mail me my jersey for an additional \$5.00.

6. SELECT RIDER PACKET DELIVERY OPTION:

Rider packets will be available for pick up on August 13th and 14th. We will notify you via email of time and location. If you prefer, we will mail your packet to you for an additional fee.

I will pick up my packet. Mail me my packet for an additional \$5.00.

GRAND TOTAL: _____ \$ _____

7. PAYMENT INFORMATION:

Check (payable to Safehouse Progressive Alliance for Nonviolence or SPAN)
 Credit Card (check one) Visa MasterCard American Express

Name (as appears on card) _____

Card #: _____ Exp. Date _____

Signature _____

RIDER SAFETY AGREEMENT

SPAN the Rockies is conducted on open roads with vehicular traffic. Roads include both marked and unmarked hazards. Though we go to great lengths to make the ride as safe as possible, always remember that safety is in your own hands and ride by these rules:

- Wear a helmet at all times – NO EXCEPTIONS.
- Carry ID and relevant medical information.
- Rules of the road apply; same rights and duties as the driver of any other vehicle.
- Ride single file where necessary, maximum of two abreast when conditions allow, do not impede traffic.
- Ride as far right as reasonable.
- Obey all traffic lights, signs, and regulations.
- Pass on the left only, announce "passing" or "hello" or "on your left".
- Use hand signals to indicate road hazards, stopping, slowing, right, and left turns.
- Prepare properly – nutrition, hydration, training, and sudden changes in weather conditions.
- Respect others: riders, volunteers, host communities, motorists, pedestrians, law enforcement, and the environment.

Riding safely and considerately is vital to your enjoyment and the safety of other riders. The future of cycling events in Colorado depends on your cooperation with the rules above.

I agree to abide by the Rider Safety Agreement: Signature/Date _____

ACCIDENT WAIVER AND RELEASE OF LIABILITY

By indicating your acceptance, you understand, agree, warrant and covenant as follows:

I acknowledge that SPAN the Rockies is an athletic event that tests a person's physical and mental limits and carries with it the potential for death, serious injury, and property loss. The risks include, but are not limited to, those caused by terrain, road conditions, facilities, temperature, weather, conditions of athletes, equipment, event officials, and event monitors, and/or producers of the event, and lack of hydration. These risks are not only inherent to athletics, but also are present for volunteers. I hereby assume all of the risks of participating as a cyclist and/or volunteer in this event. I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them or because of their possible liability without fault. I certify that I am physically fit, have sufficiently trained for participation in the event and have not been advised otherwise or to not participate in this type of athletic event by a qualified medical person. I acknowledge that this Accident Waiver and Release of Liability form will be used by event holders, sponsors, and organizers, and that it will govern my actions and responsibilities at SPAN the Rockies. In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me including my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS: Safehouse Progressive Alliance for Nonviolence, Inc., Ventac Partners LLC, the City of Boulder, the Town of Estes Park, the Town of Ward, the Town of Lyons, the Town of Gunbarrel, the City of Longmont, Boulder County, Larimer County, the State of Colorado, Elevations Credit Union, law enforcement agencies, property owners, event sponsors, event volunteers, motor vehicle operators, and officers, directors, employees, volunteers, and lessors of any of the foregoing persons or entities; (B) Indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made as the result of participation in this event, whether caused by negligence or otherwise. I hereby acknowledge that the above persons and entities have no obligation to provide medical care and have not undertaken the responsibility to do so. I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident and/or illness during this event, and fully release the person(s) providing such care from any and all liability, whether resulting from negligence or otherwise. I agree it is my sole responsibility to be familiar with the event course and agenda, the event rules, and any special regulations for the event and agree to comply with all such rules and regulations. I agree to wear a helmet at all times during the ride. I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and/or assigns. The Accident Waiver and Release of Liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. I hereby certify that I have read this document, and I understand and agree to its content.

Signature/Date _____

PARENT OR GUARDIAN WAIVER FOR MINORS (Under 18 years old)

The undersigned parent and natural guardian or legal guardian must hereby represent that he/she is, in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parents or legal guardian.

Signature of Parent/Guardian/Date _____