

1st ANNUAL

**BUTLER COUNTY  
RELAY FOR LIFE  
BIKE RIDE  
March 20, 2010**

**REGISTRATION FORM**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Age: \_\_\_\_\_ *Under 18 must be with an adult at all times or child will be picked up and taken to the nearest rest stop.*

**RIDE SELECTION (check one)**

\_\_\_ 63 Mile \_\_\_ 33 Mile \_\_\_ 15 mile

**T-Shirt Size (circle one)**

S M L XL 2X

**Children's Fun Ride Shirts (circle one)**

YS(6-8) YM(10-12) YL(14-16)

I am a cancer survivor Y / N

**Complete, sign waiver on reverse and return with \$30 check to American Cancer Society by March 1st (\$40 thereafter). Online registration at [www.relayforlife.org/butleral](http://www.relayforlife.org/butleral) (join the "Bike Ride Team")**

**JUST FOR THE KIDS**

**2 Mile Fun Ride  
\$5 Registration Fee**

The Children's ride will begin at 8am leaving from the Butler County Fair Grounds and ending at the Butler County Court House.

The Fun Ride is for children 5-12 years old. Each child rider must have a registration form and waiver form filled out by a legal guardian and turned in. **ALL riders must wear a helmet at all times and must be accompanied by an adult for the duration of the ride.** Riders may have vehicles pick them up at Norman Blackmon Motor Company.

Riders will receive a special Relay For Life youth t-shirt for their participation.

The American Cancer Society is the nationwide, community-based, voluntary health organization dedicated to eliminating cancer as a major health problem by preventing cancer, saving lives and diminishing suffering from cancer, through research, education, advocacy and service.

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RELAY FOR LIFE  
BIKE RIDE  
Benefiting the  
American Cancer Society**



Come ride the rolling hills of North Butler County in an effort to Spin Out Cancer in the 1st Annual Butler County Bike Ride. All proceeds benefit the American Cancer Society.

800.227.2345 Cancer.org  
[www.relayforlife.org/butleral](http://www.relayforlife.org/butleral)





RIDE SATURDAY , MARCH 20, 2010, MASS START 8:00 a.m. BUTLER FAIR GROUNDS, GREENVILLE ALABAMA, BENEFITING RELAY FOR LIFE OF BUTLER COUNTY

REGISTRATION: Riders may register by mail postmarked no later than 03/01/10, or via relayforlife.org/butleral (join the "bike ride team"). Early registration is \$30.00 by 03/01/10, thereafter \$40.00. Registration includes T-shirt, fully supported rest stops, sag support, and post ride meal.

Mail to: Butler County RFL Bike Ride c/o American Cancer Society 3054 C McGehee Rd Montgomery, AL 36111

Day of ride registration begins at 7:00 a.m.

EVENT LOCATION & DIRECTIONS:

The ride begins and ends at the Butler County Fair Grounds. From 65 S Exit #128 (Pineapple/Greenville) Turn right on Pineapple Hwy/AL-10 Turn right onto American Legion Rd. From 65 N Exit # 128 (Pineapple/Greenville) Turn Left on Pineapple Hwy/AL-10 Turn right onto American Legion Rd.

The Routes: 63, 33 & 15 mile options through Butler County and portions of Crenshaw and Lowndes Counties. All routes include rest stops and well-marked course. On route sag support will be available.

Inclement Weather: For rider safety, the ride may be delayed, shortened, or canceled due to inclement weather. Because of the charitable nature of this event, no refunds will be given.

More info: For more info, contact Debra Waller, Ride Co-Chair at debrawaller@att.net

800.227.2345 cancer.org relayforlife.org/butleral

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AND PARENTAL CONSENT AGREEMENT IN CONSIDERATION of being permitted to participate, in any way in the Butler County Relay For Life Bike Ride (RFLBR)-sponsored Bicycling Activities (Activity) I, for myself, my personal representative, assigns, heirs and next of kin:

1.ACKNOWLEDGE, agree and represent that I understand the nature of Bicycling Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further acknowledge that the Activity will be conducted over public roads and facilities open to the public during the Activity and upon which the hazards of traveling are to be expected. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.

2.FULLY UNDERSTAND that (a) BICYCLE ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH (RISKS); (b) these risks and dangers may be caused by my own actions, or inactions, the action or inactions of others participating in the Activity the condition in which the Activity takes place or THE NEGLIGENCE OF THESE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES 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.

3.HEREBY RELEASE DISCHARGE AND COVENANT NOT TO SUE the RFLBR, the American Cancer Society, their respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners or 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 NEGLIGENCE RESCUE OPERATIONS; AND I FURTHER AGREE that if despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, I, or any on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage or cost which may incur as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHT BY SIGNING IT, AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE TO BE IN FULL FORCE AND EFFECT.

PRINTED NAME OF PARTICIPANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

(STREET)

(CITY) (STATE) (ZIP)

PHONE: \_\_\_\_\_

PARTICIPANT'S SIGNATURE (only if age 18 or over)

DATE: \_\_\_\_\_

MINOR RELEASE

PRINTED NAME OF PARENT/GUARDIAN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

(STREET)

(CITY) (STATE) (ZIP)

PHONE: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18)

DATE: \_\_\_\_\_

All participants registering online will be required to submit waiver day of ride.

HELMETS REQUIRED

All contributions are tax deductible