

**Rider Release Form - Cranksgiving 2019 Ride**



Print First Name \_\_\_\_\_

Print Last Name \_\_\_\_\_

Team Name \_\_\_\_\_ Team Numbers \_\_\_\_\_

Address \_\_\_\_\_

City & State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Age \_\_\_\_\_

I, the undersigned, know that today's ride will be on public roads and that I could be injured or killed. I understand that bicycling can be physically demanding and that I am in good health. The bicycle I will be riding is in safe working order and I agree to ride in on today's prescribed routes in a safe and legal manner. I agree to release and hold harmless St. Louis Bicycle Works, Operation Food Search, Schlafly and all officers and workers, from liability for any personal injury to me or a minor I am signing for, and any damage or theft of personal property resulting from my participation in this ride.

I agree that any photos submitted for this event may be used by St.Louis Bicycle Works or others for any and all reasons.

Signature \_\_\_\_\_ November 3, 2019  
*(Signature of parent or guardian in rider is minor)*

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