

2017 Sandilands Cup

June 4th

Presented by Alter Ego Cycling Club & Body Driven KOM

Online pre-registration is available PRIOR TO Thursday June 1st at MIDNIGHT

Payment is NOT ACCEPTED at Alter Ego Sports, online or race day registration ONLY!



**OVER 18
FORM AND
WAIVER**

REGISTRANT INFORMATION

Please print clearly

Name

Address

City Province

Postal Code

Phone Number

Email

Birthday (month/day/year) Age as of Dec 31

RACE DAY SCHEDULE

Race Day Schedule:

- 8:30 to 9:45 - Kids Pre-Ride (U7, U9, U11, U13 only) - **All other riders risk disqualification for riding during this time.**
- 10:00 KIDS EVENT - U7, U9, U11, U13
 - Start times will stagger based on course design. All kids' races will be complete by noon. Final start times will be posted at race site.
- 12:30 to 13:15 - Pre-Ride (U15 through Elite)
- 13:30 ADULT EVENT - Elite, Expert, Comp, Sport, U17, U15 & Citizen

Awards:

Cash prizes will be awarded based on the number of entries for U11 and older categories. U9 and U7 participants will all receive a finish prize

RACE OPTIONS

MCA Plate # _____

If you are from out of Province, your UCI license # _____

Category

____ Male ____ Female

Race Categories

____ Elite ____ Expert ____ Comp

____ Sr. Sport ____ Jr. Sport ____ Citizen

Club Affiliation (if any):

Race Fees (based on race categories):

- 17 and older and adult categories Pre-Registered \$35 (Race Day - \$50)
- Citizen Pre-registered - \$10 (Race Day \$15)
- Registering 2 adults from the same CCN account will allow children under 13 to register for free!

Please note if you are under 17 and race up in an ability category (Sport- Jr. and Sr., Comp, Expert, Elite) you are required to pay that fee.

Payment

____ Cash ____ Cheque

Make cheques payable to "Alter Ego Cycling Club"

Race Day Registration: If you miss the pre-registration deadline you must register onsite. On-site registration opens at 8:30 AM and ends 1 hour before your event start **Please download the entry waiver, fill out and bring the completed form and waiver. All fees are non-refundable.**

IMPORTANT INFO ABOUT ENTRY FORM AND WAIVER U18 and 18+ races have separate waivers. Pay close attention to what you print and bring.

**CANADIAN CYCLING ASSOCIATION
WAIVER, RELEASE and ASSUMPTION of RISK AGREEMENT**

*(FOR ADULTS OVER THE AGE OF MAJORITY i.e. over 18 in Alberta, Manitoba,
Ontario, P.E.I., Quebec, Saskatchewan and over 19 in other Provinces and Territories)*

WARNING!

**By signing this document you will waive certain legal rights, including the right to sue in circumstances outlined in this Agreement .
Please read carefully.**

1. This is a binding legal agreement; therefore clarify any questions or concerns **before** signing. As a Participant in the sport of cycling and/or the events, programs, races and activities organized, operated, conducted and/or sanctioned by the Canadian Cycling Association (operating as Cycling Canada) and the Manitoba Cycling Association *and the ALTER EGO CYCLING CLUB AND STEINBACH KOM CLUB Club* regarding the **SANDILANDS MB CUP #3**, the undersigned being the Participant acknowledges and agrees to the following terms:
2. The Canadian Cycling Association (operating as Cycling Canada) **and** the Manitoba Cycling Association *and the ALTER EGO CYCLING CLUB AND STEINBACH KOM CLUB Club* regarding the **SANDILANDS MB CUP #3**, and their respective directors, officers, committee members, members, employees, volunteers, participants, agents and representatives (collectively the "Organization") is not responsible for any injury, personal injury, damage, property damage, expense, loss of income or loss of any kind suffered by a Participant during, or as a result of, the sport of cycling and any program, activity or event of the Organization, caused by the risks, dangers and hazards associated with the sport of cycling, and the programs, activities and events of the Organization, or caused in any manner by the Organization, including without limiting the foregoing, by the negligence of the Organization.
3. I am participating voluntarily in the sport of cycling and the activities, events and programs of the Organization. In consideration of my participation in the sport of cycling and the programs, activities and events of the Organization, I hereby acknowledge that I am aware of the risks, dangers and hazards associated with or related to the sport of cycling and the programs, activities and events of the Organization and that I may be exposed to such risks, dangers and hazards. The risks, dangers and hazards include, but are not limited to, injuries from:
 - a) The sport of cycling including: Road, Track, Mountain Bike, BMX and Cyclocross;
 - b) Executing strenuous and demanding physical techniques in cycling and/or exerting and stretching various muscle groups;
 - c) Vigorous physical exertion, rapid movements, quick turns and stops, and strenuous cardiovascular workouts;
 - d) Mounting, dismounting or falling off a bicycle;
 - e) Falling, tumbling or hitting any ground, surface, concrete, road, track or other surfaces;
 - f) Physical contact with other participants (including those engaged in the programs, activities and events support);
 - g) Failure to properly use any equipment, the mechanical failure of any piece of equipment or inadequate safety equipment, improper maintenance or adjustment of equipment;
 - h) Contact, collisions or being struck by other participants, pedestrians, fixed objects, spectators, equipment or vehicles;
 - i) Road conditions, terrains and vehicular traffic while cycling;
 - j) Failure to stay within the designated course area;
 - k) Extreme weather and temperature conditions which may result in dehydration, heatstroke, sunstroke or hypothermia;
 - l) Spinal cord injuries which may render me permanently paralyzed; and/or
 - m) Travel to and from events.
4. Furthermore, I am aware:
 - a) That injuries sustained can be severe;
 - b) That I may experience anxiety while challenging myself during the sport of cycling and the activities, events and programs;
 - c) That my risk of injury is reduced if I follow all rules established for participation; and
 - d) That my risk of injury increases as I become fatigued.
5. In consideration of the Organization allowing me to participate, I agree:
 - a) That my physical condition has been verified by a medical doctor to participant in the sport of cycling and in the activities, events and programs of the Organization;
 - b) That the rules of participation must be followed and that the sole responsibility for my safety remains with me, including physical and emotional preparation and fitness;
 - c) To discontinue participation if I sense or observe any unusual hazard or unsafe condition; or feel unable or unfit to safely continue;
 - d) To ASSUME all risks arising out of, associated with or related to my participation;
 - e) To WAIVE any and all claims that I may have now or in the future against the Organization;
 - f) To freely ACCEPT AND FULLY ASSUME all such risks and possibility of personal injury, death, property damage, expense and related loss, including loss of income, resulting from my participation in the activities, events and programs of the Organization; and
 - g) To FOREVER RELEASE the Organization from any and all liability for any and all claims, demands, actions, damages (including direct, indirect, special and/or consequential), losses, actions, judgments, and costs (including legal fees) (collectively, the "Claims") which I may have or may in the future, that might arise out of, result from, or relate to my participation in the sport of cycling, my presence at any venue, the events, activities or programs of the Organization, and/or my traveling to or from the events, activities or programs of the Organization, even though such Claims may have been caused by any manner whatsoever, including but not limited to, the negligence, gross negligence, negligent rescue, omissions, carelessness, breach of contract and/or breach of any duty of care of the Organization.
6. I acknowledge that I have read this agreement and understand it, that I have executed this agreement voluntarily, and that this agreement is to be binding upon myself, my heirs, spouse, children, parents, guardians, next of kin, executors, administrators and legal or personal representatives.

[By signing below, you agree to be bound this Agreement.]

Name of Participant (Please Print)

Date

Date of Birth

Signature: _____