

2018 Williamsburg Tour Registration Form

Oct 25 – Oct 28, 2018 Sponsored by the Harrisburg Bicycle Club

The prices below include 3 nights lodging at the hotel, 3 continental breakfasts, 2 hospitality nights and printed cue sheets. Additional nights *may* be available at a cost of \$89 plus tax per room per night. Contact Rick for details. Registration is on a first-come, first-served basis. *We are limited to 40 rooms. HBC membership and helmets are required.*

Name(s) _____

Address _____

Home phone _____ Cell phone _____

Email _____ HBC member? Yes _____ No _____

Emergency Contact: Name: _____ Phone _____

Double Room/Double Occupancy _____ x \$168/each _____

Double Room/Single Occupancy _____ x \$319/each _____

King Room/Double Occupancy _____ x \$168/each _____

King Room/Single Occupancy _____ x \$319/each _____

TOTAL PAYMENT DUE (checks payable to Harrisburg Bicycle Club) _____

Your \$50 per person deposit is due by 7/31/18. The balance is due by 9/15/18. Send this form and your payment to:

Rick Nevins, 3816 Philip Ludwell, Williamsburg Va 23188
rick@nevins.com, 717-579-7644

I would like to share a room at the hotel with _____

Release of Liability and Assumption of Risk

In consideration for being permitted to participate in Harrisburg Bicycle Club ("HBC") sponsored Bicycling Activities ("Activities") I, for myself and my heirs and assigns:

Fully understand that:(a) **bicycling activities involve risks and dangers of serious bodily injury, including paralysis and death ("Risks")**; (b) these risks may be by my own actions, or inactions, **or the negligence of the HBC and League of American Bicyclists (LAB)**, their directors, officers, agents, volunteers, advertisers, sponsors, and if applicable, owners and lessors of premises which the bicycling activity takes place, (each considered one of the "Releases" herein); (c) there may be other risks and losses not readily foreseeable at this time; and **I fully accept and assume all such Risks** and all responsibility for losses, costs, and; **Hereby release**, and hold harmless, the Releases from all liability, claims, demands, losses or damages that may happen to me or my heirs caused by the negligence of the Releases. I further agree that if I, or anyone on my behalf, makes a claim against any of the Releases, I will pay any litigation expenses, attorney fees, or any cost which may occur as a result of such claim. I have read and fully understand this agreement, and I understand that I have given up substantial rights by signing it, and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Signature(s): _____ Date: _____

_____ Date: _____

(If member is a minor, parent must also sign.)