

REGISTRATION FORM



Walk n Rolla Metric Century Ride

**62.2 mile Benefit Ride for
RGV Diabetes Association**

**Saturday, April 9, 2011
Registration starts @ 7:00am
Ride starts @ 8:00am**

**Hidalgo Courthouse Square
Edinburg, Texas**

*The Hidalgo County Metropolitan Planning
Organization (HCMPO) with the Edinburg
Healthy Living Festival and Edinburg
Market Days*



**Please bring this registration form
completely filled out the day of event**

PARTICIPANT INFORMATION

First Name: _____ MI: _____

Last Name: _____

Gender: _____ Male _____ Female

DOB: _____ / _____ / _____ Age: _____

Email: _____

Address: _____

City: _____

State: _____ Zip: _____

Home Phone: _____ - _____ - _____

Cell Phone: _____ - _____ - _____

EMERGENCY INFORMATION

Contact: _____

Phone: _____ - _____ - _____

Relationship: _____

Please list any medical conditions, allergies, or
medication medical personnel may need to be aware
of.

ENTRY FEE:

\$20.00

Please make checks payable to:

LRGVDC

T-Shirt Size: ___S ___M ___L ___XL

(Only a limited amount of shirts available)

Release and Waiver of Liability & Assumption of Risk Agreement

In consideration of being permitted to participate in The Hidalgo County Metropolitan Planning Organization (HCMPO), City of Edinburg, Edinburg Chamber of Commerce, Healthy Living Festival, Edinburg Market Days, and sponsored bicycling activities, I hereby make known that I will hold blameless in the case of accident, injury, or damage of any kind, the officers, members, volunteers, organizers, and sponsors of the **Walk n Rolla** bicycle rides. I recognize that bicycling is potentially dangerous and involves the risks of serious bodily injury including permanent disability, paralysis and death. I represent that I am in good health and proper physical condition to participate in such activities. I understand that all rides are on public roads with motor vehicles or public trails and that I ride at my own risk. I understand that a bicycle is a legal vehicle of the road in the state of Texas, and I will ride in accordance with the Texas Vehicle Code. I further recognize that safety is my personal responsibility, and I agree to participate in keeping all club rides safe. I am aware of the club policy that all riders under the age of 18 must be accompanied by a parent of responsible adult. And even though bicyclists may not be required by Texas law to wear helmets, I understand that wearing an approved helmet will greatly reduce my risk of serious, permanent injury.

**I certify that I am at least 18 years of age and
acknowledge and agree to the Release and
Waiver of Liability & Assumption of Risk
Agreement**

Participant's Signature

OFFICE USE ONLY:

Cash _____ Check # _____

Amount Paid \$ _____ RACE # _____