

SUNDAY, OCTOBER 2

THE LEGAL INFO

ENTRY FORM

When: Late Registration and Check-In begin at 8:00am. The 40-mile ride starts at 8:30am.

Where: **NEW LOCATION:** Show up at the **AMERICAN LEGION, 401 S Main Street** for check-in and to receive your packet.

Food: Full SAG support will be available along the route. A sit-down meal will be provided following the end of the ride.

Questions? Need more information? Need more registration forms?

Email: TOURDEFLORENCE@GMAIL.COM or

KRSLSAVAGE4@FHRD.NET

Or call: 620-878-4676 (before race day)

620-382-7722 (race day phone only)

There is a city map on the website (www.florencecks.com) which will show the layout of Florence.

NEW CHECK-IN LOCATION!!

AMERICAN LEGION, 401 S Main Street

TOUR DE FLORENCE T-SHIRTS

Our excellent souvenir T-shirts are included in the registration fee. Otherwise, they are available for \$12 each and will be available at check-in. **(Please indicate size and # of shirts below)**

Youth Medium _____ Youth Large _____

Small _____ Medium _____

Large _____ X-Large _____

Also available if preferred, 2XL and 3XL for \$15 each.

2XL _____ 3XL _____

Waiver and Release of Liability Agreement must be read, understood, agreed to, and signed. In Consideration of the acceptance for entry in the Tour de Florence (hereinafter "event") I hereby freely agree to and make the following contractual representations and agreements. I acknowledge that cycling is an inherently dangerous sport and fully realize the dangers of participating in any bicycle-related activity and FULLY ASSUME THE RISKS ASSOCIATED WITH SUCH PARTICIPATION, by way of example, and not limitation, the following physical and mental injury, emotional distress, illness, death, contact with pedestrians, vehicles, and others bicyclists, equipment failure, inadequate safety equipment, collision with fixed objects, and the effects of weather. I acknowledge all risks and I will assume and pay my own medical and emergency expenses in the event of injury or other incapacity. I hereby waive, release and discharge for myself, my heirs, executors, administrators, legal representatives, successors and assigns, all claims, damages or expenses accrued to me against the sponsors, organizers, promoting organizations, approving authorities, property owners, law enforcement agencies, all public entities, volunteers, directors, promoters, facilitators, participants, and all other parties involved with this event through or by which the event will be held for any and all damages which may be sustained by me directly or indirectly in connection with, or arising out of my participation in or association with the event, or travel to or return from the event. I agree it is my sole responsibility to be familiar with all courses and special regulations of the event, and my ability level. I understand and agree that situations may arise during the event and I must continually ride so as to endanger neither others nor myself. I accept full responsibility for the condition and adequacy of the equipment that I use. I agree, for my successors and myself. That the above representation are contractually binding and are not mere recitals, and that should I or my successors assert my claim in contravention of this agreement, I or my successors shall be liable for the expenses (including legal fees) incurred by the party or parties in defending. This agreement may not be modified orally.

Signature _____

Printed Name _____

Date _____

Parent or Guardian of a Minor: I, as a parent or guardian of the above-named minor, hereby agree on behalf of my child or ward to the terms of the above.

Parent or Guardian Signature _____

Date _____

REMEMBER YOUR HELMETS!

THEY ARE REQUIRED!



Name _____

E-Mail Address _____

Street Address _____

City _____

ST _____ ZIP _____

Age _____ DOB _____

If Under 18 Years of Age Parent or Guardian Signature: _____

Day Phone #: _____

Night Phone #: _____

Ride Registration: \$35 suggestion donation per person
Cost includes full SAG support & meal at completion of the race.

TOTAL Registration: (\$35 donation/person) \$ _____

LATE FEE IF AFTER SEPT. 25th (\$5/person) \$ _____

TOTAL T-Shirt Order: \$ _____

(Only add \$ for additional shirts ordered)

TOTAL AMOUNT ENCLOSED: \$ _____

Mail completed form with your donation payable to:

American Legion Post 308
401 S Main
Florence, KS 66851

Please mail registrations to us before September 25. There is a late registration fee of \$5.00 for registrations after Sept. 25th. A little rain won't affect it, but in case of cancellation due to extreme weather conditions (lightning, tornado) your donation will not be returned to you, but will be used by our organization for community projects and will be highly appreciated. You will still receive your T-shirt by mail.