

Wells Fargo
Kick It in Gear Bike Event
Saturday, May 18th, 2013
Lake George

Circle Option

Circle all that apply

First Name: _____ Last Name: _____ Age: _____ Event: 10 Mile / 5 Mile / 2 Mile
 First Name: _____ Last Name: _____ Age: _____ Event: 10 Mile / 5 Mile / 2 Mile
 First Name: _____ Last Name: _____ Age: _____ Event: 10 Mile / 5 Mile / 2 Mile
 Phone: _____
 E-mail: _____ Address: _____
 City: _____ State: _____ Zip: _____

Child: (Under 18 years of age)

Circle Option

First Name: _____ Last Name: _____ Age: _____ Event: 10 Mile / 5 Mile / 2 Mile
 First Name: _____ Last Name: _____ Age: _____ Event: 10 Mile / 5 Mile / 2 Mile
 First Name: _____ Last Name: _____ Age: _____ Event: 10 Mile / 5 Mile / 2 Mile
 First Name: _____ Last Name: _____ Age: _____ Event: 10 Mile / 5 Mile / 2 Mile

Youth: YS YM YL Adult: AS AM AL AXL AXXL AXXXL

Please fill quantity in the appropriate size box.
 Size preference is not guaranteed.

On average, how many minutes per week are you and your family physically active?
 **Circle one answer

Less than 30	30-60	61-100	101-149	150 or greater
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NON MEMBERS ONLY

(\$5.00 per INDIVIDUAL / \$10.00 per FAMILY*Immediate Family Only Please)**

- CASH Amount: \$ _____
 CHECK ENCLOSED Amount: \$ _____
 CREDIT CARD VISA MASTERCARD DISCOVER AMERICIAN EXPRESS

Name on Card: _____ Card Number _____ Exp Date: _____

I understand this payment is non-refundable and t-shirts will be available at the event site on Saturday, May 19th, 2012.



Please read and sign waiver located on the back page!
Mail, fax or drop off both pages to:

St. Cloud Area Family YMCA
 1530 Northway Drive
 St. Cloud, MN 56303
 Fax: 320-253-1252

Please read waiver carefully!

I understand that participating in this event is potentially hazardous, and that I should not enter and participate unless I am medically able and properly trained. In consideration of the acceptance of this entry, I assume full and complete responsibility for any injury or accident which may occur while I am traveling to or from the event, during the event, or while I am on the premises of the event. I also am aware of and assume all risks associated with participating in this event, including but not limited to falls, contact with other participants, effect of weather, traffic, and conditions of the road. I, for myself and my heirs and executors, hereby waive, release and forever discharge the St. Cloud Area Family YMCA, Bernick's, the event organizers, sponsors, promoters, representatives, successors and assigns, and all other persons associated with the event, for all my liabilities, claims, actions, or damages arising from negligence that I may have against them arising out of or in any way connected with my participation in this event.

I understand that this waiver includes any claims, whether caused by negligence, the action or inaction of any of the above parties, or otherwise.

I also give permission to the St. Cloud Area Family YMCA, Bernick's and other associated organizations to use my name and any photographs, videotapes, motion pictures, recordings or any other record on participating in this event for any publicity and/or promotional purposes without obligation or liability to me.

1. Authority to Register and/or to Act as Agent. You represent and warrant to the St. Cloud Area Family YMCA and Bernick's that you have full legal authority to complete this event registration, including full authority to make use of the credit or debit card to which registration fees will be charged. In addition, if you are registering third parties, you represent and warrant that you have been duly authorized to act as agent on behalf of such parties in performing this event registration. By proceeding with this event registration, you agree that the terms of this Registration Agreement shall apply equally to you and to any third parties for whom you are acting as agent. Compliance with Children's Online Privacy Protection Act (COPPA). You represent and warrant that, in compliance with COPPA, you are over thirteen (13) years of age, and that if you are registering a child under fourteen (14) years of age you are the parent of such child, and do hereby consent to the collection of such child's personal information by the St. Cloud Area Family YMCA and Bernick's.

2. Limitation of Liability; Disclaimer of Warranties. The St. Cloud Area Family YMCA and Bernick's SHALL NOT BE LIABLE FOR ANY DIRECT, INDIRECT, INCIDENTAL, SPECIAL OR CONSEQUENTIAL DAMAGES, RESULTING FROM (A) THE USE OR THE INABILITY TO USE THE RIVER RIDE BIKE EVENT OR (B) FOR THE COST OF PROCUREMENT OF SUBSTITUTE GOODS AND SERVICES OR (C) RESULTING FROM ANY GOODS OR SERVICES PURCHASED OR OBTAINED OR TRANSACTIONS ENTERED INTO THROUGH THE RIVER RIDE BIKE EVENT OR (D) RESULTING FROM UNAUTHORIZED ACCESS TO OR ALTERATION OF YOUR TRANSMISSIONS OR DATA, INCLUDING BUT NOT LIMITED TO, DAMAGES FOR LOSS OF PROFITS, USE, DATA OR OTHER INTANGIBLE, EVEN IF THE ST. CLOUD AREA FAMILY YMCA AND BERNICK'S HAVE BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES. YOU EXPRESSLY AGREE THAT USE OF THE RIVER RIDE BIKE EVENT IS AT YOUR SOLE RISK. THE ST. CLOUD AREA FAMILY YMCA AND BERNICK'S EXPRESSLY DISCLAIMS ALL WARRANTIES OF ANY KIND, EXPRESS OR IMPLIED, INCLUDING WITHOUT LIMITATION ANY WARRANTY OF MERCHANTABILITY, FITNESS FOR A PARTICULAR PURPOSE OR NON-INFRINGEMENT.

The St. Cloud Area Family YMCA and Bernick's make no warranty that the sites' services will be uninterrupted, secure or error free. The St. Cloud Area Family YMCA and Bernick's does not guarantee the accuracy or completeness of any information in, or provided in connection with, the River Ride Bike Event, the St. Cloud Area Family YMCA and Bernick's sites. The St. Cloud Area Family YMCA and Bernick's are not responsible for any errors or omissions, or for the results obtained from the use of such information. You understand and agree that any material and/or data downloaded or otherwise obtained through the use of the River Ride Bike Event, the St. Cloud Area Family YMCA and Bernick's sites is at your own discretion and risk and that you will be solely responsible for any damage to your own computer system or loss of data that results from the download of such material and/or data.

3. Indemnification. You agree to indemnify and hold each of the St. Cloud Area Family YMCA and Bernick's and its officers and employees harmless from any claim or demand, including reasonable attorneys' fees, made by any third party due to or arising out of your use of the St. Cloud Area Family YMCA and Bernick's or the violation of any term of this Liability Waiver or the St. Cloud Area Family YMCA and Bernick's Terms of Service by you.

4. Applicable Law; Consent to Jurisdiction. The River Ride Bike Event sites (excluding linked sites) are controlled by the St. Cloud Area Family YMCA and Bernick's from its offices within the State of Minnesota, United States of America. By completing this event registration, both you and the St. Cloud Area Family YMCA and Bernick's agree that the statutes and laws of the State of Minnesota, without regard to the conflict of laws principles thereof, will apply to all matters relating to this event registration, this Liability Waiver, or other use of the River Ride Bike Event sites. You agree that exclusive jurisdiction for any dispute with the St. Cloud Area Family YMCA and Bernick's resides in the courts of the State of Minnesota and you further agree and expressly consent to the exercise of personal jurisdiction in the courts of the State of Minnesota in connection with any dispute including any claim involving the St. Cloud Area Family YMCA and Bernick's or its affiliates, subsidiaries, employees, contractors, officers, directors, telecommunication providers and content providers.

5. Severability. If any provision of this Liability Waiver shall be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Liability Waiver and shall not affect the validity and enforceability of any remaining provisions.

By accepting this, I hereby sign this form for myself and everyone that is on this registration form.

Name (Print): _____ **Signature:** _____ **Date:** _____