



BP MS150 RECOMMENDED RIDE

YMCA Gator Bike Ride 2010 Registration Form

Name (Last) _____ (First) _____ Age: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Phone (Work): _____ (Home): _____
Email: _____

Distance (circle one): 6.2 Mile 33 Mile 43 Mile 51 Mile 62 Mile

To Register: Fill out registration form. Send with a check (payable to Baytown YMCA) or credit card information to:

Baytown Family YMCA 201 YMCA Dr. Baytown, TX 77521

Fees:

\$30 if postmarked by Feb 15, 2010 \$35—February 16-28, 2010
\$40—March 1, 2010—Day of Ride

Lisa Guy Memorial Family Ride (6.2 Mile)
\$20—1st Parent \$10—2nd Parent Kids ride free

Helmets are required. Rain or Shine. T-shirts are for paying riders only. Shirts are guaranteed for the 1st 1300 riders.

VISA MC AMEX Discover Card #: _____ Exp Date _____
Signature: _____

Emergency Contact Person: _____ Phone Number: _____

I for myself, my heirs, executors, administrators and representatives, do hereby agree to release and hold harmless the YMCA of Greater Houston, Baytown Parks and Recreation Department and the City of Baytown, cooperating organizations and any other parties connected in any way with this event, together with the respected successor and assigns (the Sponsors), singly and collectively from and against any liability for any injury, harm, loss, inconvenience or any other damage of any kind whatsoever, which may result from or be connected in any way with my participation in the Baytown YMCA Gator Ride. In addition, I hereby represent that I am physically capable of participating in these events, that my bicycle and any other equipment I may use to participate in these events are in working and safe condition, that I will observe all applicable traffic and event rules and that I will wear a helmet and generally conduct myself in a safe and prudent manner while participating in these events, and I hereby absolve and hold harmless the Sponsors from any damage I may sustain because of any breach of these representations. I hereby consent to and permit emergency treatment in the event of injury or illness while participating in these events. I also hereby give permission to the Baytown YMCA to use my name and pictures/video taken of me during these events in any promotional materials, publications or on the Internet. Notice: Waivers/Releases of riders under the age of 18 must be signed by a parent or legal guardian.

Signature: _____

Date: _____

Parent of Minor: _____

Date: _____

For more info call: Baytown YMCA 281-427-1797 or go to www.gatorride.org