



## Edible Bike Tours

### Liability Release Form

TOUR AND DATE: \_\_\_\_\_

NAME AS PER PASSPORT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

In consideration of participation in any "EDIBLE BIKE TOURS" activity, I acknowledge, agree and represent that I understand the nature of Bicycle Activities and that I am qualified to participate in such Activity. I further acknowledge that the Activity will be conducted over public roads and facilities open to the public during the Activity and upon which the hazards of all types of traveling are to be expected. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. I agree that prior to participation I will inspect the equipment I am using, and if I believe it to be unsafe, I will not participate in that event. I warrant that I am in good health, and have no physical conditions that would prevent me from participating in the EDIBLE BIKE TOUR event I have chosen to participate in. I acknowledge that EDIBLE BIKE TOURS require the wearing of an approved cycling helmet. Furthermore, I agree to abide by the rules and regulations of events and vehicle laws of the area and any local municipal laws that are applicable. I agree to the release of photography and video taken of me during EDIBLE BIKE TOURS activities for use with website, promotional, marketing, and advertisement, for the purposes of EDIBLE BIKE TOURS.

I FULLY UNDERSTAND THAT: With the full knowledge that bicycle riding can be a hazardous activity which involve risks and even dangers of serious bodily injury, and that these risks and dangers may be caused by my own actions, or inaction, the actions of others participating in the Activity, the mountainous terrain in which the activity may take place, or the negligence of the "Releasees" named below; and that there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time, and I fully accept and I assume all such risks and all responsibility for losses, cost and damages I incur as a result of my participation in the activity attendant thereto, and thus release, and agree to indemnify and save and hold harmless, waiver and forever discharge EDIBLE BIKE TOURS and its officers, directors, employees, agents, volunteers, administrators, other participants, etc. (Each considered one of the "Releasees" herein) from any and all liability, responsibility and/or property damage, losses, damages, claims, demands or causes of action against them arising from or attributable to my participation in the EDIBLE BIKE TOUR event or activity. I understand and acknowledge that risks and dangers exist during transport in a motorised vehicle of which I will participate in during this event with EDIBLE BIKE TOURS. I understand that my participation in vehicle transport may result in severe injury, death, or serious injury that may cause disability; and that these risks and dangers may be caused by the negligence of employees, officers, or agents of EDIBLE BIKE TOURS, the negligence of participants, the negligence of others, accidents, breaches of contract, forces of nature or other causes; these risks and dangers may be foreseeable or unforeseeable. I HEREBY ASSUME ALL RISKS AND DANGERS OF VEHICLE TRANSPORT AND RESPONSIBILITY FOR ANY LOSSES OR DAMAGES WHETHER IN WHOLE OR IN PART THE NEGLIGENCE OF EDIBLE BIKE TOURS AND ITS AGENTS. I also release, waive, discharge, and relinquish anybody associated with EDIBLE BIKE TOURS including, any sponsors, volunteers, advertisers, and if applicable, owners and leasers of premises on which the Activity took place, (Each considered one of the "Releasees" herein) from any and all liability, responsibility and/or property damage which I sustain during my participation in any EDIBLE BIKE TOURS event or activity. This waiver and release cover myself and all parties herein and all heirs, executors or administrators thereto, and is given in full awareness of its content and in consideration of acceptance of my application. I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND ACCEPT ALL OF THE ABOVE. I CERTIFY THAT I AM AT LEAST 18 YEARS OF AGE.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Day/Month/Year)

Signature: \_\_\_\_\_