

Rider release and indemnity

Rider details

Full name																			
Contact number																			

Emergency contact

Full name																			
Contact number																			

Before undertaking a Cancer Council SA Ride for a reason team ride:

- I declare that my physical fitness is sufficient to undertake the training ride;
- I acknowledge that all physical activity, including cycling, has risks associated with it that may cause me personal injury or damage to property, whether caused by my actions or omissions or those of others;
- I accept The Anti-Cancer Foundation of South Australia, trading as Cancer Council SA, may exclude me from the event or cancel the event at any stage and for any reason;
- I authorise Cancer Council SA to obtain medical attention of any type for me at my cost if an incident occurs and I am unable or unwilling to procure treatment;
- I waive, release, discharge and indemnify now and into the future Cancer Council SA, its officers, employees, contractors, volunteers and agents against any claim I may have or any third party claim I may cause arising for any reason from my participation in the event;
- I understand that at the ride I may be photographed and/or filmed. I agree to allow my name, photo, video, image, any statement made by me or film likeness (Personal Material) to be used for any purpose by Cancer Council SA including but not limited to any advertising, promotional, educational or other material or campaign, website or online applications that Cancer Council SA may run from time to time. I agree that any use by Cancer Council SA of Personal Material will be without payment to me and without seeking my consent;
- I will not ride without hearing and understanding the **rider briefing session** which will include:
 - ride instructions
 - ride destination
 - ride distance
 - duration difficulty
 - the name of the Cancer Council SA representative attending the ride.

Signature: **Date:** / /

Please note: If the entrant will be under the age of 18 years on the day of the event, this section MUST be signed by a parent or guardian of the entrant.

I, certify that I am the parent/guardian of (Minor) who will be years of age on the day of the Event and I consent to him/her participating in the Ride for a reason group ride.

- I have read and understood the terms and conditions set out in this registration form and:
- I agree to give the same waiver, release, discharge and indemnity as set out this registration form in respect of the Minor; and
 - I have read, understood and accept the terms and conditions set out this registration form and agree to be bound by them in relation to the Minor's attendance at and participation in the Event.

Signature of Parent/Guardian: **Date:** / /