



HALE ON WHEELS CYCLING EVENT XI SEPTEMBER 21, 2019

ALL RIDERS REGISTERED BY SEPTEMBER 3, 2019 ARE ELIGIBLE FOR 1 OF 5 REGISTRATION REIMBURSEMENTS

REGISTRATION FEES

23, 30, 45, 63, & 100 Mile Courses: \$35.00

Adult (13 & Up) Cruiser Course: \$25.00

Kid's (12 & Under) Cruiser Course: \$15.00

Event Routes : 23, 30, 45, 63, & 100 Miles Cycling OR Cruiser Course

NAME: _____ AGE: _____ ROUTE: _____ Gender: ___M___F

NAME: _____ AGE: _____ ROUTE: _____ Gender: ___M___F

Address: _____ City: _____ Zip Code: _____

Phone: _____ Email: _____

Emergency Contact: _____ Emergency Phone Number: _____

Shirt Sizes & # of Shirts: Youth Small _____ Medium _____ Youth Large _____

Adult Small _____ Medium _____ Large _____ XL _____ XXL _____ XXXL _____

How did you hear about our event?: _____

Must Be Signed By Each Rider And Enclosed With Registration

By submitting this form, I assume full and complete responsibility for any injury or accident which may occur to me during the event or while I am on the premises of the event, and I hereby release and hold harmless the presenters and all other persons and entities associated with the event from liability for injuries and damage sustained by me whether same be caused by negligence of the presenters and all other persons and entities associated with the event, or otherwise. I further acknowledge that the event will close at 3:30 pm and after that time there will be no support on the course. Further, I grant permission to use any photographs, videotapes, or any other records of this event involving me for any legitimate purpose.

All registrants acknowledges that Plainview Fitness Events (PFE), Hale on Wheels Cycling Club (HOWCC), or Plainview Christian Academy (PCA) and its agents has no responsibility for the operation of the Hale on Wheels Cycling Event and is only acting as an agent to register applicants who wish to participate in the Hale on Wheels Cycling Event. Accordingly, the registrant agrees to hold PFE, HOWCC, and PCA and its agents harmless from any liability or injury resulting from the Hale on Wheels Cycling Event. Furthermore, the registrant agrees that it shall have no claim against PFE, HOWCC, and PCA or its agents for any injury that may occur during the Hale on Wheels Cycling Event. The individual event operators and sponsors have provided information included in this site and PFE, HOWCC, and PCA does not verify the accuracy or completeness thereof. All confirmed orders are final once payment is submitted.

By signing the form, I acknowledge I have completely read and understood the above statements.

Signature: _____ Date: _____

Signature: _____ Date: _____

**Print, complete and mail, with fees, to:
Hale on Wheels Cycling Event
2317 W. 5th Street #170, Plainview, TX 79072**