



## REGISTRATION FORM 2009

Name \_\_\_\_\_ Family Members \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

City, State Zip: \_\_\_\_\_ Email (optional) \_\_\_\_\_

I plan to ride: \_\_\_\_\_ 20 Miles \_\_\_\_\_ 40 Miles (You may change your mind on ride day.)  
\_\_\_\_\_ Individual \$15 \_\_\_\_\_ Family \$35 \_\_\_\_\_ T-shirts \$10 (if registered by 7/15/2009)

T-shirt Size: \_\_\_\_\_ Small \_\_\_\_\_ Medium \_\_\_\_\_ Large \_\_\_\_\_ XLarge \_\_\_\_\_ Other

Amount Enclosed \_\_\_\_\_ (make checks payable to MN Parks & Trails Council c/o Central Lakes Trail)

I understand that Central Lakes Tour entry fees are not refundable or transferable to others and the ride is held rain or shine. I agree to wear a properly fitted hard-shell bicycle helmet at all times when riding a bicycle at the Central Lakes Tour event. By my entry into this event, I hereby accept its inherent risks and certify that I am physically fit and able to participate. I grant my consent to any duly authorized doctor or medical personnel to provide me medical treatment in response to any accident, injury, or illness during this event. I hereby waive and release any and all claims for damages, including negligence claims, incurred as a result of taking part in this event against the Central Lakes Tour, CentralLakesTrail.com Association, any and all organizers, sponsors, officials, vendors, volunteers, and associated entities, with their heirs and assigns, singly or collectively. I grant permission without obligation or liability for the use of my name, image, or other record of me taking part in the Central Lakes Tour for promotional purposes. I agree to obey any applicable traffic rules; to heed the direction of public safety officers and event officials; and to ride and conduct myself with due caution and respect, so as not to endanger anyone or disrupt the enjoyment of fellow bicyclists, motorists, or others.

Signature of Participant \_\_\_\_\_

Signature of Guardian (if under 18) \_\_\_\_\_

### Mail Registration forms to:

City of Evansville  
PO Box 265  
Evansville, MN 56326  
or call Diana @ Evansville City Hall 320.834.4995 or 320.766.8176