



17th Annual

Maine Lighthouse Ride

Sponsored by the Eastern Trail Alliance

Saturday, September 12, 2020

Southern Maine Community College

South Portland



Registration - 1 form per rider - signed waiver required to register

Name _____

Address _____

E-Mail _____

Age: _____ (if under 18 must have an adult along on the ride)

Cell Phone (for day of ride) _____

Emergency contact phone # for day of ride:

Circle Ride Choice: 25 mi 40 mi 62 mi 100 mi

Circle Sock Unisex Size: M (6 - 11) L (10-13) Socks for ALL!!! First Beer Free!!!

Registration Fees:

ETA members:

\$75 until 7/31/2020

\$85 8/1/2020 - 8/31/2020

ETA non-members:

\$ 95 until 7/31/2020

\$105 8/1/2020 - 8/31/2020

(11 and under free; 12 - 17 \$25; anyone under 18 must have adult with them to ride)

Register on-line at www.eastertrail.org or make check payable to ETA and send registration and signed waiver to:

P O Box 250, Saco, ME 04072

Registration capped at 1,000. Registration ends on August 31, 2020

No refunds, transfers or on site registration.

www.EasternTrail.org



Eastern Trail Alliance Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement

IN CONSIDERATION of being permitted to participate in any way in the Eastern Trail Alliance sponsored Bicycling/Walking/Running Activities I for myself, the minor I represent, my personal representatives, assigns, heirs and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of Bicycling/Walking/Running and that I am qualified, in good health, and in proper physical condition 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 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.

2. FULLY UNDERSTAND that: (a) BICYCLING/WALKING/RUNNING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions, or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) 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 ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS AND DAMAGES I incur as a result of my participation in the Activity.

3. HEREBY RELEASE DISCHARGE AND COVENANT NOT TO SUE the Eastern Trail Alliance, their respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers and if applicable, owners and lessors of premises on which the Activity takes place, (each considered on of the "RELEASEES" herein) FROM ALL LIABILITY CLAIMS, DEMANDS, LOSSES OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf makes a claim against any of the Releases, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss liability, damage, or cost which any may incur as the result of such a claim.

I also give the Eastern Trail Alliance permission to use any photos, which include my image for promotional purposes as they see fit.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF AN NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOT WITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PARTICIPANT'S SIGNATURE	PRINTED NAME	DATE
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____
4 _____	_____	_____
5 _____	_____	_____
6 _____	_____	_____
7 _____	_____	_____
8 _____	_____	_____
9 _____	_____	_____
10 _____	_____	_____

Signature and Title of Witness
Date:

Address