

RELEASE OF LIABILITY AND COVENANT NOT TO SUE
Please read carefully before signing
This is a release of liability and waiver of certain legal rights

In consideration for being permitted to participate in bicycling and bicycling related activities (the "Activities") at the Michigan Scholastic Cycling Association ("MiSCA") Event (the "Event"), I agree to the following Release of Liability and Covenant Not to Sue (the "Release"):

1. Acknowledgment and Assumption of Risks. I understand that the Activities are inherently dangerous and involve significant risks of personal injury, death, and property damage. By means of example and not limitation, I understand that I may encounter risks associated with variations in terrain, natural and human-made hazards and obstacles and the design and construction thereof; as well as risks relating to my conduct and the conduct of others participating in the Activities, which independently or in combination with the Activities may cause personal injury, death, and property damage. I hereby assume and accept responsibility for all risks of personal injury, death, and property damage which might be associated with my participation in the Activities whether known or unknown and whether attributable to my actions or inactions or the actions or inactions (including negligence) of anyone else.

2. Release of Liability and Covenant not to Sue. I hereby release and discharge the MiSCA and its directors, officers, volunteers, members, employees, and agents, any Event sponsors, and any other owner, operator, or manager of the facilities hosting an event (the "Released Parties") from any and all responsibility, liability, claims, damages, costs, attorneys' fees, expenses, and from any and all causes of action either known or unknown, relating to or arising out of my participation in the Activities. Further, I hereby covenant not to sue or assert any claim of any nature against the Released Parties relating to or arising out of my participation in the Activities.

3. Indemnity. I agree to indemnify and hold harmless the Released Parties from and against any and all claims, costs, expenses, or liability (including attorneys' fees), attributable to personal injury or death, or to damage or destruction of property relating to or arising out of my participation in the Activities. If I am signing this Release on behalf of a minor, I agree to indemnify and hold harmless the Released Parties from and against any and all claims, costs, expenses, or liability (including attorneys' fees), attributable to personal injury or death, or to damage or destruction of property relating to or arising out of the participation in the Activities by the minor on whose behalf I am signing this Release.

4. Representations. I represent that: (i) I am 18 years old or older; (ii) I know of no reason, medical or otherwise, which would prevent me from participating in the Activities; (iii) I understand and agree that this Release is binding upon me, and my heirs and assigns; and (iv) if I am signing this Release on behalf of a minor, I represent that I have full legal authority to do so and realize the binding effect of this Release on them, as well as on myself.

5. Consent to Medical Treatment. If I, or the minor on whose behalf I am signing this Release, is injured or becomes ill, I consent to and authorize the provision of emergency first aid or medical treatment.

I, THE UNDERSIGNED, HAVE CAREFULLY READ THIS RELEASE OF LIABILITY AND COVENANT NOT TO SUE, I FULLY UNDERSTAND ITS TERMS AND I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT. I HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND I INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF RELEASED PARTIES TO THE GREATEST EXTENT ALLOWED BY LAW.

MiSCA Participant Information:

Full Name: _____ Date of Birth: ____/____/____

Signature: _____ Date Signed: ____/____/____

Home Address: _____ City: _____

State: _____ Zip: _____ Email Address: _____

Emergency Contact Information:

Full Name: _____ Phone: (_____) _____ - _____

Parent or Legal Guardian Information: *if MiSCA participant is under age 18 at time of Event*

Full Name: _____

Signature: _____ Date Signed: ____/____/____