

# ENDLESS BIKING

## Registration

Name: \_\_\_\_\_ Program: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ PC: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact Name and Number: \_\_\_\_\_

Birth Date: (Y) \_\_\_\_\_ (M) \_\_\_\_\_ (D) \_\_\_\_\_ Age: \_\_\_\_\_ Male / Female \_\_\_\_

BC Medical Card #: \_\_\_\_\_

Allergies: Please list any allergies that we should know about ie: Food, Medications, Bees, etc.

Previous Injuries: \_\_\_\_\_

Are you a member of any cycling club, provincial, state, or national organization: Yes / No

If "YES" please name: \_\_\_\_\_

If "NO", you must then purchase our insurance to participate in our programs.

How did you hear about Endless Biking? \_\_\_\_\_

Mountain biking is an adventure sport **with inherent risks**. For all kids programs, participants must be between the age of 10-18 years of age with permission from a legal guardian, for all adult programs, participants must be over the age of 19. All participants must sign a waiver prior to the start of every camp. Please submit a signed waiver with your registration form. Every participant must be a **member of our club** for the 2005 season.

Endless Biking caters to beginner, intermediate, and advanced riders. All participants will be grouped accordingly. Please submit a completed participant questionnaire with your registration form.

Note: Waivers and Participant Questionnaires are available on our website or from our office.

Program Description: \_\_\_\_\_ Course Dates: \_\_\_\_\_

Cost: \$ \_\_\_\_\_

\_\_\_\_\_ + \$10 Membership fee the for 2005 season (to be renewed annually)

\_\_\_\_\_ + \$26 Insurance for the 2005 Season (REQUIRED unless already insured through Cycling BC)

Total: \$ \_\_\_\_\_

### Method of Payment:

Cash

Cheque; payable to Endless Biking (address & fax number below)

Visa or Mastercard Card #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Name as it appears on the card: \_\_\_\_\_

Signature: \_\_\_\_\_ \*\*\* Bring Card to be have signature verified on day of camp.!!

Waiver Submitted: Y N

Questionnaire Submitted: Y N

**Comments:** Feel free to give us any feedback on your experience with us so far.

### Cancellation / Date Change Policy:

Up to ten days before the camp/lesson date: Full refund, less \$25. Between ten and three days of the camp/lesson date: 50% refund. Within three days of the camp/lesson date or no show: no refund.

Send to:

397 East Keith Road, North Vancouver, BC V7L 1V8

Fax: 604-682-7433

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

NAME & DATE OF EVENT: \_\_\_\_\_

## WAIVER, RELEASE & INDEMNITY

I, \_\_\_\_\_ understand and agree that my participation in events, programs, races, or activities organized, operated, conducted and/or sanctioned by the Canadian Cycling Association and/or Provincial Associations and Various CCA Clubs and Members registered with CCA is conditional upon my execution of this document.

1. I am aware that cycling, and in particular competitive cycling, endurance and BMX racing, involves the possibility of injury or death.
2. I accept these risks, and all others arising from these events and programs, even if arising from the **negligence, gross negligence or negligent rescue** by those associated in any way with the **Canadian Cycling Association** events and programs I may be involved in, the venues at which these events and programs takes place or by those organizing, officiating, or participating in these events and programs throughout the year, including their respective officers, directors, employees, agents, servants, volunteers and representatives (the "Releasees").
3. I understand that all applicable rules for participation must be followed and that **SOLE RESPONSIBILITY FOR MY PERSONAL SAFETY REMAINS WITH ME**, including my physical and emotional preparation and fitness to participate in all events and programs throughout the year.
4. I undertake and agree to remove myself from participation if I sense or observe any unusual hazard or unsafe condition, or if, at any time, at any event or program, I feel unable or unfit to safety continue for any reason.
5. I give, a **FULL RELEASE AND WAIVER OF LIABILITY AND ALL CLAIMS** that I have, or may have in the future, against **Canadian Cycling Association, and all other Releasees** from all liability for any loss damage, injury or expense that I may suffer as a result of my participation in any part or parts of the events or programs or my presence at any venue at which they may take place, due to any cause whatsoever including the forms of negligence set forth in paragraph 2 above or from any breach of contract or statutory duty or other duty of care including any duty of care owed under the relevant Occupier's Liability Act, on the part of the Releasees.
6. **I AGREE NOT TO SUE and I further agree TO INDEMNIFY AND SAVE HARMLESS** the Releasees from all expenses, fees, liability or damage award or cost of any type whatsoever arising from my participation in these events or programs.

**I HAVE READ AND UNDERSTOOD THIS WAIVER, RELEASE AND INDEMNITY. I am aware that by signing this agreement I am waiving substantial legal rights (on my behalf and on behalf of my heirs, executors, administrators and next of kin), including the giving up of my right to sue.**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### PARENTAL CONSENT FOR MINOR PARTICIPANT and INDEMNITY AGREEMENT

I have read and understood the above waiver, release and indemnity, and have discussed the same with the minor person signing above. I am satisfied the said minor understands the waiver and release and his/her obligations as set out. In consideration of the participation of my minor child/ward I too agree to waive, release and indemnify the Releasees in the terms set out above.

*I am aware that by signing this agreement I am waiving substantial legal rights, which my minor child/ward and I, our respective heirs, executors, administrators and next of kin may have against the Releasees.*

SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_

# ENDLESS BIKING

## Skills Questionnaire

<b>Name:</b>	
Years mountain biking:	
Fitness Level/other activities:	
Type of bike I own:	
Type of riding I like to do:	
Name of trail I like to ride:	
Skills I am working on now:	
Skills I'd like to learn:	

Answer as accurately as you can, as we will be determining groups based on the following information.

Skills: (tick the appropriate box)	Want to Learn	Sometimes Successful	Very Successful
Ride comfortably on uneven terrain			
Ride yellow line on road			
Ride wide bridges (approx. 2 foot)			
Ride narrow bridges (approx 1 foot)			
Ride teeter-totters			
Basic cornering			
Riding tight switchbacks on smooth terrain			
Ride steep descending turns on technical terrain			
Ride corners at high speed (whistler)			
Can hold a track stand for a few seconds			
<b>Braking/Descending:</b>			
Comfortable riding steep descents			
Know the importance of rear & front brake			
Use of brakes without skidding			
Ride down steep rough descents			
Ride down rock faces			
<b>Wheel Lift:</b>			
I can lift my front wheel off the ground			
I can lift my front wheel over a curb			
I can lift my front wheel over obstacles on trail			
I can lift my front wheel using a pedal stroke			
I can lift my rear wheel			
<b>Manuals: (speed off a drop)</b>			
I have taken air			
I have aired off a 1-3 foot drop			
I know how to wheelie Drop			
I know how to Bunny hop			
<b>Climbing:</b>			
I can climb up smooth surfaces			
I can shift smoothly on a climb			
I can climb technical single-track			
I can get over an obstacle while on a climb			