

CYCLIST NUMBER

REGISTRATION FORM

First Name _____ Last Name _____

Address _____ City/State _____ Zip _____

E-Mail Address (Mandatory) _____

Emergency Contact _____ Phone _____

Relevant Medical Info _____

CATEGORY

CIRCLE Gender/Age/Category

MALE FEMALE

Under 18 19-29 30-39 40-49 50-59 60-79 Antediluvian+

CATEGORY

Racers = R Ultracyclist = UC Tri-athletes = TRI Tourist = Tour
HPV = HPV Tandems = TAN Mt. Biker = MTB Clydesdale (200lbs+) = CLY

Payment Check _____ Money Order _____ (Check one)

GODZULLA CHALLENGE FULL PACKAGE FEE (BEST DEAL) \$ 25.00
(Includes Ride, Timing, Food/Drink/Feeds, Support)
(Postmarked Before 2007 May 5th STRICT!)

NOTE: TANDEM = \$25.00 (Each must fill out separate registration)

JUST RIDE (WATER/FEED WILL RECEIVE SECRET TAG) \$ 20.00

JUST RIDE (SELF SUPPORTING) \$ 10.00

TRANSPORT BACK TO START (RIDER/BIKE Based on Min. 10)
(If we do not receive minimum by May 1st then full refund) \$ 35.00

(FULL PACKAGE POSTMARKED AFTER MAY 5TH) \$ 35.00

DAY OF EVENT FEE FULL PACKAGE \$ 40.00

DAY OF EVENT BASIC RIDE FEE (NO TIMING!!) \$ 20.00

DONATION TO ANGIE KNOECHEL (100 % TO ANGIE) \$ _____

GODZULLA WAIVER

WARNING OF RISKS, LIABILITY, RELEASE, AND INDEMNIFICATION AGREEMENT

In signing this agreement for myself or for the named participant (if under the age of eighteen), I know that those participating in Godzulla will be exposed to the risks of serious bodily injury, sickness, or death due to circumstances inherent in this event, including the negligent acts or omission of others. I understand and am aware that there are a variety of specific risks and dangers inherent in the voluntary bicycling event such as Godzulla, including, without limitations, falls, collisions, with other bicyclists, motor vehicles, or stationary objects: adverse weather conditions and those caused by conditions of the road, such as broken pavement, railroad crossings, and road crossings. I further understand that by participating in Godzulla I will be riding my bicycle on public roads with many other bicyclists, some of whom are inexperienced at riding in large groups, and that the large number of riders in Godzulla adds an additional element of danger and unpredictable behavior. In exchange for being permitted to participate, I voluntarily agree to assume all of the risks inherent in participating in Godzulla.

In acknowledgement that I (or the participant for whom I sign, if under the age of eighteen) am physically capable and sufficiently trained to complete this event. I also attest that the equipment used by me (or the participant for whom I sign, if under the age of eighteen) has been inspected and is in good mechanical condition, I am familiar with its proper use and that I will be financially responsible for any loss or damage to that equipment or for personal injury or death resulting from its use.

I am aware that the medical support provided will be my own responsibility. If anyone is called upon to provide assistance for first aid I consent and authorize any such individual to assist me (or the participant for whom I sign, if under the age of eighteen) if necessary and appropriate. I further understand that any such medical or other services provided is not an admission of responsibility to provide any such services and is not a waiver by any said parties rights under this agreement.

I understand that any person involved or associated with Godzulla assume no responsibility or liability with respect to my participation in this event. I agree, however, to abide by any decision of any person involved or associated with Godzulla, relative to my ability to safely participate in this event. I further promise to wear an ANSI, Snell or ATSM/SEA approved helmet at all times while riding my bicycle during Godzulla and I waive my rights to any benefits associated with Godzulla if I fail to wear such a helmet while on a bicycle.

Having read this waiver and knowing these facts and in consideration of Godzulla's acceptance of my application for participation in Godzulla, for myself and anyone entitled to act on my behalf, do agree to release, hold harmless, and discharge Godzulla, all sponsors, representatives (including event volunteers), any involved municipalities or other organizations and the boards, trustees, officers, employees of any of them, from any and all claims or liabilities of any kind arising out of my participation in Godzulla even though that liability may arise out of negligence, recklessness, or carelessness on the part of the persons or entities named in this waiver.

I also grant permission to Godzulla and its sponsors to use any photographs, motion pictures, recordings or any other record of my participation in Godzulla for legitimate purposes.

I further agree to indemnify and to hold harmless the persons and entities listed in this agreement for any liability that may incur to me, a member of my family, (or the participant for whom I sign, if under the age of eighteen) in connection with Godzulla.

I further agree that if, in breach of this agreement, I institute any judicial proceedings against any of the persons listed in this agreement in connection with Godzulla, I shall bring them in the Common Pleas Court of Clermont County, Ohio, and I consent to personal jurisdiction in that court. I further agree that, if in breach of this agreement, I institute such proceeding; I am responsible for all costs and attorney's fees of any person or entity against whom I institute such proceedings.

I further confirm that the participant for whom I sign is at least the age of fourteen.

HAVING READ AND UNDERSTOOD THIS AGREEMENT, I VOLUNTARILY AND KNOWINGLY SIGN IT.

Participant's Printed Name: _____

Participant's Signature: _____

Date: _____

IF PARTICIPANT IS UNDER THE AGE OF 18 COMPLETE BELOW:

Parent/Legal Guardian's Printed Name: _____

Parent/Legal Guardian's Signature: _____

Date: _____

**Make Checks payable to:
Godzulla Challenge
5909 Price Road
Milford, OH 45150
C/O S BECKNER**