

WILMINGTON TRAIL CLUB
HELMETS MUST BE WORN ON ALL WTC BIKE RIDES

Leader: _____ Date: _____ Location: _____ Miles: _____

Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement

In consideration of being permitted to participate in any way in the Wilmington Trail Club Bicycling activities I, for myself, my personal representatives, assigns, heirs and next of kin:

- Acknowledge, agree and represent that I understand the nature of bicycling activities and that I am in good health, and in proper physical condition to participate in such activity. I further acknowledge that the activity will be conducted on public roads and facilities open to the public during the activity and upon which hazards of traveling are expected. I further agree and warrant that if at any time I believe the conditions to be unsafe, I will immediately discontinue further participation in the activity.
- Fully understand that:
 1. Bicycling activities involve risks and dangers of serious bodily injury, including permanent disability, paralysis and death.
 2. 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.
 3. 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, cost and damages I incur as a result of my participation in the bicycling activity.
- I hereby release, discharge and covenant not to sue the Wilmington Trail Club, their officers, volunteers and employees, other participant(s) and if applicable, owners and lesser of premises on which the activity takes place (each considered on the "releasees" herein) from all liability, claims, demands and losses, or damages on my account caused or alleged to be caused in whole or in any part by negligence of the "releasees" or otherwise, including negligent rescue operations. I further agree that if despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OR RISK AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the "releasees", I will indemnify, save and hold harmless each of the "releasees" from any litigation expenses, attorney fees, loss liability or cost which any may occur as a result of such claim.

I have read this agreement, fully understand its terms, and understand that I have given up substantial rights by signing it. I have signed it freely and without any inducement or assurance of any nature, and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law. I also agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in force and effect.

Signature	Printed Name	WTC Member Yes/No	Date	Emergency Phone
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Before signing in - read the **Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement** located on page one.

Signature	Printed Name	WTC Member Yes/No	Date	Emergency Phone
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Return Promptly to: Ken Berg
202 Virginia Avenue
PO Box 73
Galena, MD 21635