Tree City Rolling Tour / Century Registration Form

Name:					
Address:					
City:	State:	Zip:			
Phone:	Cell Phone:			_	
Email:			(<u>PL</u>	EASE PRIN	IT CLEARLY)
DOB:	Age:		M /	F	
Pre-registration up to Day of registration: \$\frac{\sigma}{\sigma}\$ Kids 13 & under are following to the paying. Add \$15for: Check precise the characters are paying.	35 after June ree ay be available eferred size: 9	the day o	Med	Large	Xlarge
Add \$19 for: Check pr				4XL	
Some Jerseys are avail Jerseys \$60/ Ple		-	t.		
Which ride are you rid	ing? 16	34 Hil	ly 67_	Flat 67	/ 100
Where did you hear ab	out our ride?				
Have you rode our ride	e before? Yes	or No (circle o	ne)	

Please sign Waiver (Must Sign)

In consideration of the acceptance of my registration for the Tree City Rolling Tour Ride, and realizing the risks involved during COVID-19, I hereby waive, and release any and all rights and claims for damages I have against the sponsors, volunteers and the Decatur County Family YMCA for any injury that I may suffer during my participation in the Tree City Rolling Tour Fundraiser scheduled to be held on June 24, 2023. I attest that I am physically fit and have trained for this event, and that I am entering this event of my own free will.

Signature _____