

## **PELTONIA 10**

### **The Ohio State University Student Rider Registration**

#### **About Pelotonia:**

Pelotonia is a grass roots bike tour with one goal: to end cancer. Thanks to our generous sponsors, Pelotonia is able to direct **100 percent** of every dollar raised directly to life-saving cancer research at The Ohio State University Comprehensive Cancer Center- James Cancer Hospital and Solove Research Institute. Pelotonia focuses on creating an intense and memorable experience with its core purpose of funding cancer research. Pelotonia looks forward to welcoming riders with varying levels of cycling experience who will enjoy an ambitious weekend of cycling, entertainment and volunteerism.

#### **About the Pelotonia Student Program:**

We will work to spread awareness, recruit riders, and fundraise for the student Peloton. If you would like to further your Pelotonia experience, join the Pelotonia Student Team. You may join one of six committees in which we will plan, organize and implement events on campus and throughout Columbus. If interested, in being a committee member please email Colleen Ross at [ross.663@osu.edu](mailto:ross.663@osu.edu).

#### **Requirements:**

Students who register to ride as part of the OSU Student Peloton must:

- Raise a **minimum** of \$500 by **Friday August 13, 2010** to be eligible to ride in Pelotonia August 20-22, 2010.
- Be registered as a full time student for this current academic year at The Ohio State University

#### **Perks:**

Registered OSU Student Peloton members will receive exclusive discounts and re-contribution from roll: Riders will receive:

- 10% off of anything in the store including bikes
- 10% re-contribution to your fundraising account

**PELTONIA 10 REGISTRATION FORM:**

**Are you a Pelotonia Alum?**

**2009 login info:**

**Email** \_\_\_\_\_

**Password** \_\_\_\_\_

**Please fill out all fields below:**

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Current Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Email address \_\_\_\_\_

Phone number \_\_\_\_\_

Birth date \_\_\_\_\_

Jersey size (XS-XXL) \_\_\_\_\_

Preferred Password \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_

**Emergency Contact**

Contact Name \_\_\_\_\_

Contact Phone \_\_\_\_\_

Relation \_\_\_\_\_

**Transportation**

I want to use Pelotonia's shuttle

I will provide my own transportation

**Lodging:**

I want to stay on campus in a dorm

I will find my own lodging

**Routes:** Please select which route you will ride in Pelotonia 10

**Columbus to Groveport** (Approximately 23 miles)

**Columbus to Amanda** (Approximately 43 miles)

**Circleville to Athens** (Approximately 75 miles)

**Columbus to Athens** (Approximately 102 miles)

**Circleville to Athens and Back** (Approximately 150 miles)

**Columbus to Athens and Back** (Approximately 180 miles)

**Waivers and Agreements:**

**Please review the Fundraising Agreement and Cancellation Policy, Release of Liability and Assumption of Risk, and check the following boxes if you agree to the terms. You will not be able to complete your registration without indicating your acceptance of the terms.**

**PARTICIPANT RELEASE OF LIABILITY AND ASSUMPTION OF RISK**

In consideration of being allowed to participate in the Pelotonia bicycling tour and its related events, activities and training rides, I, the undersigned, acknowledge, appreciate and agree that:

1. I am at least 18 years old.
2. The risk of injury from participation in Pelotonia is significant, including the potential for permanent paralysis and death, and while particular rules, equipment and personal discipline may reduce this risk, the risk of serious injury does exist.
3. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, associated with participating in Pelotonia, and, understanding such risks, voluntarily desire to participate in Pelotonia.
4. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS of participating in Pelotonia EVEN IF SUCH RISKS ARISE FROM THE INTENTIONAL OR NEGLIGENT CONDUCT OF THE RELEASEES (defined below) or others, and whether or not such risks are covered by my personal health or other types of insurance; and I assume full responsibility for my participation in Pelotonia.
5. I am physically capable of participating in Pelotonia.
6. I willingly agree to comply with the stated and customary terms and conditions for participation in Pelotonia and its related events, activities and training rides. If, however, I observe any unusual significant hazard during my presence at or participation in Pelotonia and its related events, activities and training rides, I will remove myself from participation and bring such to the attention of the nearest official immediately.
7. I, on behalf of myself and my heirs, assigns, personal representatives, administrators, estate and next of kin, HEREBY VOLUNTARILY, IRREVOCABLY AND FOREVER: (i) RELEASE Pelotonia, The Ohio State University, each sponsor of Pelotonia, each owner and/or lessor of any premises, property or piece of equipment used to conduct Pelotonia and its related events, activities and training rides, each of the foregoing parties' respective affiliates, and each of the foregoing parties' respective current and former owners, partners, members, officers, directors, trustees, employees, agents, volunteers, officials, representatives and other participants (collectively, "RELEASEES"), FROM ANY AND ALL LIABILITY WHATSOEVER, INCLUDING WITHOUT LIMITATION, LIABILITY FOR ANY AND ALL INJURIES, DISABILITIES, DEATH, LOSSES OR DAMAGES TO PERSON OR PROPERTY, ARISING DIRECTLY OR INDIRECTLY IN CONNECTION WITH MY PARTICIPATION IN PELOTONIA AND ITS RELATED EVENTS, ACTIVITIES AND TRAINING RIDES, WHETHER OR NOT CAUSED BY THE INTENTIONAL CONDUCT, ACTIVE OR PASSIVE NEGLIGENCE OR OTHER FAULT OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law; (ii) WAIVE MY RIGHT TO SUE OR MAKE ANY DEMAND WHATSOEVER against any RELEASEE for any damages or losses arising, directly or indirectly, in connection with my participation in Pelotonia and its related events, activities and training rides; (iii) AGREE NEVER TO SUE ANY RELEASEE asserting any claim for damages or losses suffered, directly or indirectly, in connection with my participation in Pelotonia and its related events, activities and training rides; and (iv) AGREE TO INDEMNIFY AND HOLD EACH RELEASEE HARMLESS from any and all claims, demands, suits, damages, expenses, costs, liabilities, judgments, settlements and losses of any

and every kind suffered or incurred by any RELEASEE and arising, directly or indirectly, in connection with my participation in Pelotonia and its related events, activities and training rides.

8. I understand this Waiver, Release of Liability and Assumption of Risk inures to the express benefit of the RELEASEES and may be relied upon and enforced by any RELEASEE. I also understand that the effectiveness of this Waiver, Release of Liability and Assumption of Risk shall indefinitely survive my participation in Pelotonia and its related events, activities and training rides.

I HAVE READ THIS WAIVER, RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND THE TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING AND AGREEING TO THE TERMS, AND SIGN AND AGREE TO THE TERMS FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

**I Accept the Release of Liability and Assumption of Risk**

X\_\_\_\_\_ (sign here)

#### **FUNDRAISING AGREEMENT AND CANCELLATION POLICY**

##### **Fundraising Agreement**

In consideration of the acceptance of my registration to participate as a Student Rider in Pelotonia, I agree to raise \$500 for the particular route that I chose. If I fail to raise and collect \$500 by August 6, 2010, I will be ineligible to participate in Pelotonia 2010.

##### **Cancellation Policy**

I agree that by registering to ride in Pelotonia as a student rider, I am obliged to raise \$500 by Friday August 6, 2010. If I do not raise \$500 by Friday August 6, 2010 I am not eligible to ride in Pelotonia 2010. I agree that, even if I cancel my participation in Pelotonia, the funds that I have raised as of the date of my cancellation as well as any funds that I raise on or after the date of my cancellation are not refundable to me or my donors.

I HAVE READ THIS FUNDRAISING AGREEMENT AND CANCELLATION POLICY, FULLY UNDERSTAND THE TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING AND AGREEING TO THE TERMS, AND SIGN AND AGREE TO THE TERMS FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

**I Accept the Fundraising Agreement and Cancellation Policy**

X\_\_\_\_\_ (sign here)