**Lone Star Cyclists (LSC) Ride Waiver Acceptance and Sign-in** **Page of**

**Ride:** **Date: Saturday** **Ride Leader:**

**Lone Star Cyclists Ride Waiver:**

By joining this ride and being permitted to participate you assume all risks and liabilities of the activities and release Lone Star Cyclists from any claim by you, your representatives, heirs or next of kin.

1. You understand the nature of bicycling activities and you are qualified to participate in such activity. You understand that these activities will be conducted over public roads and facilities open to the public during the activity and upon which the hazards of traveling are to be expected. You further agree that if at any time you believe conditions to be unsafe, you will immediately discontinue further participation in the activity.
2. You fully understand that:
   (a) Bicycling activities involve these risks and dangers of serious bodily injury, including permanent disability, paralysis, and death.
   (b) These risks and dangers may be caused by your 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 participants, organizers, and patrons of Lone Star Cyclists.
   (c) There may be other risks and social and economic losses either not known to you or not readily foreseeable at this time, and you fully accept and assume all such risks and all responsibility for any losses, cost, and damages you incur as a result of your participation in the activity.
3. YOU RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO HOLD HARMLESS LONE STAR CYCLISTS, THEIR RESPECTIVE ADMINISTRATORS, DIRECTORS, AGENTS AND EMPLOYEES, OTHER PARTICIPANTS, ANY SPONSORS, ADVERTISERS, AND IF APPLICABLE, OWNERS AND LEASERS OF PREMISES ON WHICH THE ACTIVITY TAKES PLACE, FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON YOUR ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THEM, INCLUDING NEGLIGENT RESCUE OPERATIONS.

| Printed Name | Signature | Route Dist | LSC Member Y/N | Cell Phone Number |
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