

Swiezy / Pope
Montauk Railroad Memorial
Montauk Railroad Century



Time: 7:00 am
Date: Saturday, June 10, 2017 (**NEW DATE!** Please Join Us!)
Place: Babylon Train Station

Join the Suffolk Bicycle Riders Association for Long Island's premier 100 mile ride.

Registration is **by check only** and must be accompanied with a signed entry form (provided below).
To participate you MUST BE A CURRENT SBRA MEMBER by March 31, 2017 (NO EXCEPTIONS).

Registration Fee: with a one way non-refundable train ticket is \$40. No checks will be accepted after June 1st.

Registration Fee: no train ticket is \$20. Absolutely no checks will be accepted after June 1st.

There is NO day of registration for this event. Cue sheets are provided, route not marked. No supported water stops.

SAG service will be limited: If you have never done a long ride please have an alternate ride home.

Riders receive snacks and a comfortable ride back to Babylon on the LIRR (if registered with train ticket option).

Bicycles are individually padded by experienced club members and returned to Babylon by moving van.

Due to insurance rules, SBRA membership is required for this event.

NAME _____
Print Clearly
MAILING ADDRESS _____
TELEPHONE _____ **E-MAIL** _____
EMERGENCY CONTACT TELEPHONE (not you or anyone on the ride) _____

I will be doing a **Century** Ride I will be doing a **Metric Century** Ride

TO ENTER: Fill out the information above, sign the waiver below, include a non-refundable **check made out to SBRA** and **MAIL TO:** Joanna Pascucci, 6 Washington Avenue, Smithtown, NY 11787. Confirmation will be by email.

NOTE: You will need \$5.00 in change and/or dollars to feed the meter at the Babylon Train Station.

Questions: call Joanna Pascucci 631-747-3464, or visit us at www.sbraweb.org for further information.

LEAGUE OF AMERICAN BICYCLISTS (LAB)
SUFFOLK BICYCLE RIDERS ASSOCIATION (SBRA)
RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

IN CONSIDERATION of being permitted to participate in any way in Suffolk Bicycle Riders Association ("SBRA") sponsored Cycling Activities, I for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of Cycling Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further acknowledge that the Activity 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. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.

2. FULLY UNDERSTAND that: (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH ("RISKS"); (b) 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; (c) 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, COSTS, AND DAMAGES I incur as a result of my participation in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the SBRA, the LAB, their respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF 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, damage, or cost which any may incur as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND 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 AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Signature of registrant _____
 (Or parent if under 18) Parent or Guardian must accompany anyone under 18 years of age.