



Canadian Bible Society
10 Carnforth Road
Toronto, ON M4A 2S4
Email: Bike4bibles@biblesociety.ca
Website: Bike4bibles.ca
Tel: 1-800-465-2425

Registration Form

To register and fundraise online, go to <http://bike4bibles.ca/support-b4b/join-us>. If you are unable to fundraise online, you may use the sponsorship sheet at <http://bike4bibles.ca/tools>.

PERSONAL INFORMATION *(Please print clearly).*

Name: _____

Address: _____ City: _____ Prov: _____ Postal Code: _____

Date of Birth: (DD/MM/YYYY) _____ Gender: Male Female

Health Insurance Number: _____

Dietary/Medical Restrictions: *(use a separate sheet if necessary):* _____

Tel: _____ Cell: _____

Email: _____

Emergency Contact: _____ Contact Tel: _____

Church: _____

INDIVIDUAL RIDE INFORMATION

T-Shirt Size *(check one)*: S M L XL XXL

Specify Ride: _____ Date of Ride: _____

PAYMENT INFORMATION

Mastercard/Visa # _____ Exp. Date: _____

Amount: _____ Signature: _____

Or mail cheque/money order along with your completed form to the **Canadian Bible Society – 10 Carnforth Rd., Toronto, ON M4A 2S4.**



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WAIVER AND INDEMNITY

In consideration of my being permitted to participate in [CHOOSE ONE: BIKE FOR BIBLES, RUN FOR THE WORD (the "Event")] offered by or organized by the Canadian Bible Society ("CBS"), I hereby for myself, my heirs, executors, administrators and assigns release and forever discharge and save harmless and indemnify CBS, their officers, managers, servants, agents, corporate sponsors, cooperating organizations and churches, and any other parties connected with this Event in any way ("Parties), solely or collectively, from any and all blame, liability, lawsuits, actions, claims, costs, expenses or demands by reason of any damage, harm, loss, misadventure, inconvenience, death or injury, to myself or to my property arising from my participation in the Event or any activity associated therewith however caused, arising out of or in connection with the Event and whether the same may have been contributed to or occasioned by the negligence, directly or indirectly, of the Parties.

I recognize that there are inherent risks and hazards involved in the Event and I agree to assume all such risks and hazards. I confirm that I am physically capable and fit to participate in this Event and I have no medical conditions or needs other than those listed below. I will train as necessary for the good of the team. I consent to and permit emergency treatment in the event of injury or illness and to bear all costs of rescue or medical attention rendered to me personally arising from the Event. I further understand that the Event is not a race. I agree to walk / run / ride in a safe and controlled manner at all times and agree to wear a helmet while on a bike. I agree to abide by the directives of CBS staff and Team Captains. I understand that my participation in the Event may be cancelled without refund if CBS staff or Team Captains assess me unfit to participate due to medical conditions, use of drugs or alcohol, foul language or other unacceptable behaviour.

I give full permission to use my name and consent that all photos taken by CBS will be the property of CBS and can be used for any of their publications or online.

I confirm that I am eighteen years of age or older. (*Younger participants must have a parent or legal guardian read and sign this document.*)

I HAVE READ THIS WAIVER AND INDEMNITY AND ACCEPT ITS TERMS.

(Please print clearly, one person per page.)

Signed the _____ day of _____, _____ at the city/town of _____
in the province of _____.

Participants Name: _____ Telephone: _____

Address: _____

City/Town: _____ Postal Code: _____

Email: _____ Food Allergies: _____

Medical Conditions: _____

Emergency Contact: _____ Relationship: _____ Tel: _____

If participant is under 18: *Parents or legal guardians must sign for minors under 18, whether they accompany the minor on the trip or not.*

Signature of Participant, or Parent of Guardian: _____

Participant's age: _____ years.