



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

Group/Family Registration Form

This form is for Group and Family Registrations only. The assigned leader should complete this form and submit to the Canadian Bible Society by

- Email at bike4bibles@biblesociety.ca
- Fax at (416) 757-3376 or
- Mail at 10 Carnforth Road, Toronto, ON M4A 2S4

Once submitted, a Personal Fundraising page will be created for the group. The Group Leader is responsible for collecting the **signed waiver forms** and submitting them to the Canadian Bible Society at the event.

TEAM LEADER INFORMATION *(Please print clearly).*

Group Leader Name: _____
 Group Leader Address: _____
 Group Leader Phone: _____
 Group Leader Email: _____
 Group Emergency Contact Number: _____
 GROUP NAME: _____

GROUP MEMBERS INFORMATION *(Please print clearly).*

Group Member Name	Email	Activity	T-Shirt Size	Waiver Signed *
		<input type="checkbox"/> Ride <input type="checkbox"/> Run/Walk	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL	
		<input type="checkbox"/> Ride <input type="checkbox"/> Run/Walk	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL	
		<input type="checkbox"/> Ride <input type="checkbox"/> Run/Walk	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL	
		<input type="checkbox"/> Ride <input type="checkbox"/> Run/Walk	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL	
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		<input type="checkbox"/> Ride <input type="checkbox"/> Run/Walk	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL	

* Submit signed waivers at the day of the event



BikeforBibles

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Group Member Name	Email	Activity	Shirt size	Waiver signed
		<input type="checkbox"/> Ride <input type="checkbox"/> Run/Walk	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL	
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		<input type="checkbox"/> Ride <input type="checkbox"/> Run/Walk	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL	

REGISTRATION SUMMARY

Total # of Ride Participants: _____ Total Amount: _____
 Total # of Run/Walk Participants: _____ Total Amount: _____

Overall Total: \$ _____

PAYMENT INFORMATION

Mastercard/Visa/Amex # _____ Exp. Date: _____
 Amount: _____ Signature: _____

CHEQUE/MONEY ORDER: Mail 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:** _____] (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.