



Saturday April 20, 2024

3.4 Mile Guided Community Bike Ride

9:00 AM Registration, **Free** Breakfast, Tabling,
Minor Bike Repairs & Helmet Fitting

10:15 AM - 12:15 PM Community Ride

12:15 PM Ice Cream Social at Hope Station

FREE Helmet, Light & Lock For All Participants | All Ages & All Skill Levels Welcome

Start at New Life Community Church | 64 E. North Street | Carlisle, PA

End at Hope Station | 149 W. Penn Street | Carlisle, PA

Visit Project SHARE, YWCA, Hope Station and other local landmarks to learn more!
Learn safe biking skills at each site and acquire bike safety equipment and tips.

Ages 18+ need to sign waiver

Ages 14-17 need waiver signed by parent/guardian BUT can ride alone

Ages <14 need waiver signed by parent/guardian AND an adult to ride with them

Rain Date: April 27, 2024- Cancellation Announced via Facebook Event

**Bringing together community members of all ages to
explore our neighborhood safely on bikes**

Bikelisle
Borough of Carlisle
Carlisle BikeLab
Carlisle Parks and Rec
Carlisle Tool Library
Carlisle Victory Circle

Carlisle West Side Neighbors
Harrisburg Bicycle Club
Hope Station
Lifecycle Carlisle
New Life Community Church
Project SHARE
YWCA Carlisle & Cumberland County

Dickinson

www.Dickinson.edu/NorthSideRide

ASSUMPTION OF RISKS, RELEASE & INDEMNIFICATION

Northside Ride | Carlisle, PA | April 20, 2024 (Rain date April 27, 2024)

Sponsored by Dickinson College

Co-sponsors: Hope Station, YWCA of Carlisle and Cumberland County, Project SHARE, New Life Community Church, LifeCycle, Carlisle Tool Library, Harrisburg Bicycle Club, Bikelisle & Bike Lab (collectively "Sponsors")

1. I acknowledge that I have had the opportunity to fully inform myself about the Northside Ride and related activities ("Event"), that participation in the Event is purely voluntary and is not required as a part of any course of study at or by any employment or association with any of the Sponsors. All non-motorized forms are transportation can ride in the Event.
2. I acknowledge that the Event carries a risk of physical injury or death. I understand and agree that Dickinson College ("Dickinson or Sponsor"), all Co-Sponsors, any and all of their employees and agents, and any organizers, or hosts of the Event or associated with the Event have not made and cannot make, me, my family, or my heirs and assigns any promises or guarantees with regard to the health and safety risks that any participant may incur.
3. I agree to become familiar with and to **abide by all rules and regulations** imposed for the Event. I also agree to exhibit appropriate behavior at all times, to demonstrate respect for all people, equipment, and facilities, and to participate with a cooperative and positive attitude.
4. I understand and agree that participants in the Event are required to arrange for their own health, accident and liability insurance.
5. I will secure such first aid, medical advice or treatment and/or related services as deemed necessary for my health and safety, and I agree to accept full financial responsibility for such advice or services.
6. I understand and agree that any photographs, video recordings, of me during the Event may be freely used in connection with any marketing, publicity, or promotional activities and that I will not be entitled to any compensation for any such use.

7. **RELEASE AND INDEMNIFICATION: FOR MYSELF AND ALL THOSE WHO MAY CLAIM**

THROUGH ME OR IN MY PLACE, I, _____ [print name], intending to be legally bound, HEREBY WAIVE AND RELEASE, and agree to indemnify, hold harmless and forever discharge, Dickinson and all Co-Sponsors, their insurers, successors, assigns, trustees, directors, board members, officers, employees, agents and representatives, from any and all claims, demands, debts, contracts, causes of action, lawsuits, damages and liabilities, of every kind and nature, and from any cause whatsoever (including, without limitation, actions deemed negligent, grossly negligent or reckless), whether known or unknown, in law or in equity, that I ever had or may have, arising from or in any way related to my participation in the Northside Ride event.

This Waiver and Release contains the entire agreement between the undersigned, Dickinson and Co-Sponsors, supersedes all prior oral or written agreements between us, and may only be amended by a writing signed by the undersigned, Dickinson and Co-Sponsors.

8. **I have read, understand and fully agree to the terms of this Waiver and Release. I understand and agree that by signing this Waiver and Release I have given up considerable future legal rights. My signature is proof of my intention to execute a complete and unconditional Waiver and Release and to be legally bound hereby. I am 18 years of age or older and mentally competent to enter into this Waiver and Release.**

9. **I hereby expressly, knowingly, voluntarily, and freely assume all of the risks of injury or death** that could occur as a result of my participation in the Event, even if arising from the negligence or act or omission of the Sponsors or any entity or person released in the foregoing paragraph.
10. I also agree that this waiver shall be governed by Pennsylvania substantive law and that any litigation related to the enforceability of this waiver will be brought in the State of Pennsylvania.

RULES OF THE RIDE

Adults over 18+: Require a signed wavier

Minors ages 14-17: Require signed waiver with parent/guardian consent **AND** may ride alone.

Minors 13 and under: Require signed waiver with parent/guardian consent **AND** must be accompanied by an adult over age 18 on the ride **AND** be supervised at all times.

OVER 18: PARTICIPANTS 18 YEARS OF AGE OR OLDER MUST READ AND SIGN:

I acknowledge that I have read paragraphs 1-9 above, that I understand them, that I am knowingly and voluntarily sign this Assumption of Risks, Release, and Indemnification, and accept and agree its terms.

Date: _____ Signed: _____

Print Name: _____

Emergency Contact: Name _____ Phone: _____

UNDER 18: PARENT OR GUARDIAN OF PARTICIPANT/S MUST READ AND SIGN:

I, the parent and/or Legal Guardian of the minor(s) identified below acknowledge that I have read the paragraphs above and understand them, and that I, for myself and for the minors listed below, knowingly and voluntarily sign this Assumption of Risks, Release, and Indemnification and accept and agree to its terms.

Date: _____ Signed (Parent or Guardian): _____

Print Name (Parent or Guardian): _____

Minor 1 Name: _____

Minor 1 Age: _____ Accompanied by (Name): _____

Minor 2 Name: _____

Minor 2 Age: _____ Accompanied by (Name): _____

Emergency Contact: Name _____ Phone: _____