

Maxxis Eastern States Cup

Bib #

Official Use Only

Gender:			
Class	Male	Date of Birth: / /	_
	Female	Age as of 12/31/22:	(Example: 44)
First Name			
Last Name			
Address			
City			
State/Zip			
Phone	-	-	
E-Mail			
Emergency Contact			
Emergency Contact #			
In consideration of the acceptance of my entry in the Maxxis Eastern States Cup: I understand that mountain biking is a potentially hazardous activity which could cause injury or death. I should not enter and participate unless I am medically able and properly trained and by my signature, I certify that I am medically able to perform this event, am in good health, and am properly trained. I agree to abide by any decision by a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I assume all risks associated with participating in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the trails, travel to and from the event, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the City of Claremont NH, the Claremont Parks and Recreation Department, and all sponsors, their representatives and successors from all claims and liabilities of any kind including any and all damage caused by negligence of any of them arising out of my participation in the event and releases each of them against any such claim that I or my guest or those listed above may have. I understand that there are no refunds regardless of the circumstances and that I must be present to receive any raffle prizes or awards that I may win. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.			
Signatur			Date
Gaurdia	n		Date