



COLOMBA CHEMO CLASSIC CHARITY RIDE ENTRY FORM

To the Event Director: (PLEASE USE BLOCK CAPITALS)

Event name:	Colomba Chemo Classic				Date of ride:	12 Nov 2011					
Title: (Mr/Miss/Mrs)					Date of birth:					I enclose entry fee of:	£15
First Name:					Surname:						
Address:											
Town:					County:						
Postcode:					Telephone:						
My E-mail address:					Club/Team:						
Please circle a category	JM Male under 18yrs	M Male 18- 40yrs	M40 Male 40- 50yrs	M50 Male 50-60yrs	M60 Male 60+yrs	JF Female under 18yrs	F Female 18-40yrs	F40 Female 40-50yrs	F50 Female 50-60yrs	F60 Female 60+yrs	

DISCLAIMER

- By completing the entry form, you are agreeing to the rules of this disclaimer notice.
- For participants under 16, a parent or guardian should sign below.
- All participants should satisfy themselves that they are fit to take part before entering the event. If you have any doubts, please refer to your GP.
- Parents or guardians must ensure that their child is fit and able to take part in the event.
- The organisers reserve the right to prohibit individuals from taking part.
- Children under the age of 16 must be accompanied by an adult at all times.
- We strongly advise participants to wear helmets and other suitable protection ie. gloves, waterproofs etc.
- Bike riders must follow the instructions of the organisers or their appointed agents at all times.
- Participants must not be under the influence of alcohol.
- If participants are taking medication which could cause drowsiness, etc., please seek medical advice before completing the entry form.
- Participants should follow the Highway Code at all times. See www.highwaycode.gov.uk.
- Please take extra care if the weather is wet and be aware that the route includes roads.
- Cancellation policy: No refunds can be given, however named substitutions can be accepted.
- Participants permit Colomba Cycle Company to use any photographs taken during the ride for any advertising or editorial purposes, including the worldwide web.
- While Colomba Cycle Club will take all reasonable care to ensure the event is conducted in a safe manner it is the responsibility of participants to satisfy themselves that any equipment used is in good working order before the ride.
- I understand and agree that I participate in this ride entirely at my own risk, that I must rely on my own ability in dealing with all hazards and that I must ride in a manner which is safe for myself and all others.
- I am aware that when riding in an event and particularly when riding on a public highway the function of the marshals is only to indicate direction and that I must decide if the movement is safe
- **Liability cannot be accepted for any damage, injury or loss arising from the negligence of participants (whether through failure to observe the rules of the event or otherwise).**

Where did you hear about this ride? (Please tick)	<input type="checkbox"/> Cycling Plus	<input type="checkbox"/> Colomba Cycle Company Newsletter
	<input type="checkbox"/> Cycling Weekly	<input type="checkbox"/> Local Cycling Club (please specify) _____
	<input type="checkbox"/> Recommended by friend	<input type="checkbox"/> Other (please specify) _____

Signed	_____
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ENTRIES WITHOUT CORRECT FEE OR DETAILS MAY NOT BE ACCEPTED

Please return completed forms along with a cheque for £15 made payable to Colomba Cycle Club to: Stuart Watson, 25 Quakers lane, Richmond, DL10 4BQ