To be completed by Event Organizer		Bib #
Event/Series Name: Natchez Trace Century	Ride Event/Series Date(s) C	ctober 17, 2020 Permit 2020776
USA Cycling Assumption In consideration of USA Cycling ("USAC") allo event or series, including travel to and from a and whether as a rider, official, coach, mecha any legal and personal representatives, exect 1. Assumption of Risk. I am aware that cyc collision with pedestrians, vehicles, other part equipment failure; inadequate safety equipment the Event is an extreme test of a person's ph loss that may result from my own actions, ina 2. Release of Liability. I hereby forever relea directors, agents, employees, volunteers, ind Union Cycliste Internationale ("UCI"), sponsor and each of their respective officers, agents, related to my participation in the Event. I u of their costs, including legal fees. I agree claims, charges, demands, losses, damages, or unknown, including foreseen or unforesee any way connected to, related to, or arising of 4. Health. I represent that I am in good health make such determination and that I am resp Event, I consent to the release of my name at 5. Rules; Regulations; Equipment. I agree is subject to, and shall abide by, the competitive published at www.usacycling.org. I agree to I I accept responsibility for the condition and u USAC rules and regulations and I assume all 6. Anti-doping. I understand and agree that it testing. If it is determined I may have committ or to the results management authority of the 7. Use of Information. I understand that USA agreement and for marketing purposes. I furth who need access to this information to perfor USAC and its select marketing partners may. 8. Media Grant. I grant to USAC and its desig works and derivative works, and otherwise util in any manner or medium (whether now or he an Event, without compensation or notice to cycling, or any commercial use so long as suc 9. Governing Law; Jurisdiction; Severabili effect to any choice or conflict of law provision other than those of Colorado. Any legal suit, a Denver, Colorado or state courts located in C courts in any such suit, action or proceeding. or unenforceability shall not affect any	of Risk, Release of Liability, Covenant No owing me to participate in any USAC sanctioned event on event or series (collectively the "Event"), whether threanic, volunteer, spectator, or otherwise, I, for myself, mutors, administrators, successors and assigns, hereby coling involves inherent risks, including but not limite icipants, animals, and fixed or moving objects; imperfectent; use of equipment or materials provided to me; and sysical and mental limits and may involve the risk of sections or negligence, and also from the actions, inaction asse, waive, and discharge USAC, USA Cycling Deve ependent contractors, members, clubs, officials, event is, organizers, property owners, law enforcement agency employees, and volunteers (collectively, "Releasees") cluding claims arising from the ordinary negligence rement. I will not make any claim against Releasees costs, attorney's fees, judgments, liens, indebtedness in bodily injury and personal injuries and property dament of indemnify, hold harmless, and defend releasees to be familiar with and abide by the rules and regulation and proper physical condition to safely participate in the onsible for my own well-being at all times while participate in the onsible for my own well-being at all times while participate on the rules, regulations, policies and Code of Conduct adop be familiar with the Event course. I agree to ride and participate on the course of the selection of such a helmet. The UCI and/or my national federation and I agree that arb AC may collect or receive my contact information in contact and anti-doping rule violation, I agree to submit to the UCI and/or my national federation and I agree that arb AC may collect or receive my contact information in contact and my services on USAC's behalf, (b) USAC may also shall use this information to contact me with information and genes the right and license to use, copy, modify, broadize my image, likeness, name, voice, comments or othe preafter existing), filmed, photographed or otherwise recording or provision	to Sue and Indemnity Agreement or series and all activities related to or connected with an ough the issuance of an annual or one-day membership y spouse, children, guardians, heirs and next of kin, an agree as follows: In to those associated with man-made and natural jumps to course conditions; surface hazards, including pot holes weather conditions. I fully understand that participating it rious injury or death, economic loss, property damage on sor negligence of others. Opment Foundation and each of their respective officers directors, local associations, and affiliates as well as the ises, and public entities, that are connected with the Even from any and all claims that may arise out of or are of Releasees. In for injury, damage, death or any other loss arising from the firm of this agreement, Releasees may seek to recover a soft from any and all claims that it is my sole responsibility to pating in the Event. If I suffer any injury arising from the and their insurance carriers. In sestablished for an Event. I also agree that I am teed by USAC as amended from time to time and riticipate so as to neither endanger myself nor others. For my use. I will wear a helmet that complies with the results management authority and processes of USAD, it ration is my exclusive remedy under the above rules. In this designees may share this information with third partie to this information with select marketing partners, and (offers believed to be of interest to me. and the information with select marketing partners, and (offers believed to be of interest to me. and the information with select marketing partners, and (offers believed to be of interest to me. and the information with the laws of Colorado, without givin that would cause the application of laws of any jurisdiction fracevorable any other provision in any other jurisdiction of suce information in the provision of suce information of unity in the inherent risks of cycling and the ordinary.
unconditional release of all liability to the	greatest extent permitted by law.	
Printed Name of Participant	Signature of Participant	Date of Birth
Emergency Contact Name	Emergency Contact Number	
I attest that I am the parent or legal guardian	PARENTAL / LEGAL GUARDIAN CONSEN of the minor participant named above. I have carefully	
Printed Name of Parent/Guardian	Signature of Parent/Guardian	 Date

Natchez Trace Century Ride COVID-19 Waiver

I acknowledge the contagious nature of the Coronavirus/COVID-19 and that the CDC and many other public health authorities still recommend practicing social distancing.

I further acknowledge that the City of Ridgeland and the organizers of the Natchez Trace Century Ride (NTCR) event have put in place preventative measures to reduce the spread of the Coronavirus/Covid-19,

I further acknowledge that the City of Ridgeland and the organizers of NTCR event cannot guarantee that I will not become infected with the Coronavirus/COVID-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to City of Ridgeland employees and/or event volunteers.

I voluntarily seek services provided by the City of Ridgeland and the organizer of the NTCR event and acknowledge that I am increasing my risk of exposure to the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures to reduce the spread while attending the NTCR event.

I attest that:

- *I am not experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.
- *I have not traveled internationally within the last 14 days.
- *I have not traveled to a highly impacted area within the United States of America in the last 14 days.
- *I do not believe I have been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19.
- *I have not been diagnosed with Coronavirus/Covid-19 and not yet cleared as non-contagious by state or local public health authorities.

I hereby release and agree to the City of Ridgeland and the organizers and volunteers of the event harmless from, and waive on behalf of myself, heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs expenses and compensation for damage of loss to myself and/or property that may be caused by any act, or failure to act of the City of Ridgeland, the organizers, employees and/or volunteers of the NTCR event. I understand that this release discharges the City of Ridgeland and the organizers of the NTCR event from any liability or claim that I my heirs, or any personal representatives may have against the City of Ridgeland and the organizers of the NTCR with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from the City of Ridgeland and the organizers of the NTCR event. This liability waiver and release extends to the City of Ridgeland employees and all NTCR organizers and volunteers.

Name (print)	Signature	Date