



Bikemore Event Registration, Release of All Claims, and Photo Consent

I/we have full knowledge of the **risks** involved and am/are physically fit to participate in this event. Also, in consideration of my/our participation, I/we (along with my heirs and administrators) **release and discharge all participating organizations and sponsors for injuries or damages** incurred during the event. I/we also authorize the Ardmore Neighborhood Association and all the Bikemore organizers to use any **photograph**, interviews, personal narrative, or audio or video recordings of my/our participation in this event.

Print Name	Signature (each adult must sign)	# of people in your group