

**Loons Rally Registration Form - Please join us for the 2011 Loons Rally!
Friday, August 5th – Sunday, August 7th Crosslake Minnesota**

Saturday Night Group Dinner

We are arranging a Saturday Night Group Dinner, most likely at the host hotel (or other appropriate location based on our size.) Please note if you are interested in joining us!

Choose one:

Yes – Sign us up! **No, we are not interested**

Host Hotel and Ride Start:

Pine Peaks Lodge and Suites
14047 Swann Drive, Crosslake, MN 56442
888-488-7829
<http://www.pinepeakscrosslake.com>

Rally Information:

- All meals are at rider's expense.
- Saturday's route is 52 miles with a short cut at 44 miles & options for 61 or 74 miles.
- Sunday's route is 53 miles with a short cut at 38 miles & options for 63 or 70 miles.
- Both Saturday and Sunday there are options for rest stops and lunch.

Registration forms due by Monday, August 1st. Please give your e-mail address if you would like a notice of receipt of registration.

Registration is \$15 per tandem team & will include insurance coverage for the event & membership in the Twin Cities Tandem Club. (If you are already a member, your membership will be extended one year.)

Make checks payable to: Twin Cities Tandem Club

Mail this form & your check to:

Deb Liang & Matt Tillotson
1236 Hague Avenue
St. Paul, MN 55104

Name(s)	Last	First	Home Phone	
	Last	First	Work Phone	
Address		City	State	Zip

Email Address(s):

Waiver: In signing this release and waiver for myself and or a named applicant under the age of 18, I understand that the Twin Cities Tandem Club, its officers and members, are not insurers of my personal safety. I understand that bicycling is potentially a dangerous activity and I might be severely injured or killed while riding a bicycle. I hereby accept the risk of serious bodily harm or death. For myself and/or said minor, my (and my minor's) heirs, executors, and assignees, I hereby waive, release, forever discharge and agree to hold harmless the Twin Cities Tandem Club, its officers and members and any organizers, sponsors and their representatives of any organizational events, singly and collectively, from any and all claims, liability, injury, damages, loss or harm from my (or my minor's) having sustained personal injuries or personal or economic damage by reason of their actions or inactions in further in organizational activities and during participation in organizational events or during travel to, and return from , such events. I waive any and all specific notice of the existence of the risks and hazards. I inspect my bicycle and keep it in reasonably good and safe conditions for the rides. I have an adequate and reasonable knowledge of what is prudent and safe bicycle riding and shall ride in that manner for my own protection and the protection of others. I am aware of and have knowledge of the applicable Bicycle Rules of the Road. I will wear a helmet during all club-sponsored rides. The above agreements and representations are my express understanding of the risks and I assume these voluntarily and freely without coercion or duress. This agreement may not be modified orally and may not be Waived in any respect.

Rider's Signature:	Rider's Signature:
Printed Name:	Printed Name

(All riders must sign.)

The undersigned parent or guardian hereby consents to the rider's participation and waives and releases all rights and claims for damages as is more fully set forth above.

Parent or guardian please sign below if applicant is under 18.

Signature Parent/Guardian: