B.C.M.C.A. TT sign-on, start & results sheet

Race location: _____ Date: _____

Sign on order/number will be the riders start order and time, e.g. rider # 1 starts at :01, rider # 2 at :02, etc.

WAIVER, SAFETY AFFIRMATION AND RELEASE:
In consideration of the acceptance of this membership application and of being allowed to participate in the B.C. Masters Cycling Association activities, I hereby personally assume all risks in connection with those activities and I further agree to forever release, discharge, waive, save and hold harmless the B.C. Masters Cycling Association, Cycling B.C., the Canadian Cycling Association, the Activity Leaders, Volunteers, and any Agents from any claim by me, or by my family, estate, heirs or assigns arising out of my participation in these activities. This includes, but is not limited to, waiving any and all rights, demands, or claims for damages and causes for suits or actions known or unknown, and further includes but is not limited to medical expenses or other expenses in the event of accident, illness, other incapacity, death or damage to property. I further state that I (rider, parent or guardian) am of lawful age and legally competent to sign this Affirmation, Waiver and Release. I understand that the terms of this document are contractual and not a mere recital and I have signed this document as my own free act. I attest and verify that I have full knowledge of the risks involved in participation of Club activities**. I agree to obey the rules of the road and act in a courteous manner towards other road users in a spirit of goodwill and co-operation. I understand I need my own liability coverage (Cycling BC Race License). I have fully informed myself of the contents of this Affirmation, Waiver Release by reading it before signing below.**

Start #	*Name* (please print)	*Signature*	*YOB*	*Standard*	*Finish*	*Elapsed*	*Variance*	*Fastest*	*Adjusted*

Men 75-79

Start #	Name	Time	Variance	Place

Women 75-79

Start #	Name	Time	Variance	Place

Men 70-74

Start #	Name	Time	Variance	Place

Women 70-74

Start #	Name	Time	Variance	Place

Men 65-69

Start #	Name	Time	Variance	Place

Women 65-69

Start #	Name	Time	Variance	Place

Men 60-64

Start #	Name	Time	Variance	Place

Women 60-64

Start #	Name	Time	Variance	Place

Men 55-79

Start #	Name	Time	Variance	Place

Women 55-59

Start #	Name	Time	Variance	Place

Men 50-54

Start #	Name	Time	Variance	Place

Women 50-54

Start #	Name	Time	Variance	Place

Men 35-39

Start #	Name	Time	Variance	Place

Women 35-39

Start #	Name	Time	Variance	Place

Men 30-44

Start #	Name	Time	Variance	Place

Women 30-34

Start #	Name	Time	Variance	Place

Juniors A

Start #	Name	Time	Variance	Place

Juniors B

Start #	Name	Time	Variance	Place

Fondo Men

Start #	Name	Time	Variance	Place

Fondo Women

Start #	Name	Time	Variance	Place

B.C.M.C.A. Fondo sign-on sheet

Race location: _____ Date: _____

WAIVER, SAFETY AFFIRMATION AND RELEASE:
In consideration of the acceptance of this membership application and of being allowed to participate in the B.C. Masters Cycling Association activities, I hereby personally assume all risks in connection with those activities and I further agree to forever release, discharge, waive, save and hold harmless the B.C. Masters Cycling Association, Cycling B.C., the Canadian Cycling Association, the Activity Leaders, Volunteers, and any Agents from any claim by me, or by my family, estate, heirs or assigns arising out of my participation in these activities. This includes, but is not limited to, waiving any and all rights, demands, or claims for damages and causes for suits or actions known or unknown, and further includes but is not limited to medical expenses or other expenses in the event of accident, illness, other incapacity, death or damage to property. I further state that I (rider, parent or guardian) am of lawful age and legally competent to sign this Affirmation, Waiver and Release. I understand that the terms of this document are contractual and not a mere recital and I have signed this document as my own free act. I attest and verify that I have full knowledge of the risks involved in participation of Club activities**. I agree to obey the rules of the road and act in a courteous manner towards other road users in a spirit of goodwill and co-operation. I understand I need my own liability coverage (Cycling BC Race License). I have fully informed myself of the contents of this Affirmation, Waiver Release by reading it before signing below.**

Start #	*Name (***please print***)*	*Signature*	*Finish (time)*	*Elapsed*