

Charity Cycling Event Participation Agreement

Participant Information

Full Name:

Address:

Email:

Phone:

Event Details

Event Name:

Event Date:

Location:

Agreement Terms

- I confirm that I am in appropriate physical condition to participate in this event.
- I understand the risks involved and voluntarily accept all responsibility for any injury, loss, or damage.
- I agree to abide by all rules and instructions provided by the event organizers.
- I grant permission for the use of any photographs or video taken of me during the event for promotional purposes.
- I understand that entry fees and any donations are non-refundable.

Date:

Signature: