



Class Registration Form: Fall I 2010
8 Weeks- August 16th to October 9th, 2010

Child's first name	Child's last name		
Child's Date of Birth (xx/xx/xxxx)	Years	Months	
Parent/Guardian's first name	Parent/Guardian's last name		
Email address	Contact telephone number		
Street Address	City	State	Zip Code

Cost is \$109 for an 8-week session, 20% sibling discount. Additional \$10 yearly program membership required. Make checks payable to Boulder Indoor Cycling or pay with cash or a Credit Card. We will pro-rate the cost if you want to enter mid session. Free open riding is for kids enrolled in the current session of Cycletykes, please call to make reservations (parent's supervision required).

Please circle the appropriate age group and times/days you will be able to attend:

Scooters- 2 to 3 Yrs old
Wheelers - 3 to 4 Yrs old
Pedalers- 4 to 5 Yrs old

Ringers- 5 to 6 Yrs old
Cruisers - 6 to 8 Yrs old
Jumpers- 8 to 10 Yrs old

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
9:00 AM	Wheelers	Wheelers	Private Lessons	Scooters	Scooters	Pedalers
10:00 AM	Scooters	Pedalers	Private Lessons	Pedalers	Pedalers	Scooters
11:00 AM	Wheelers	Scooters	Private Lessons	Wheelers	Wheelers	Wheelers
12:00 PM	Free Open Riding	Free Open Riding	Private Lessons	Free Open Riding	Free Open Riding	
1:00 PM	Pedalers	Jumpers	Ringers	Jumpers	Pedalers	
2:00 PM	Jumpers	Wheelers	Pedalers	Cruisers	Jumpers	
3:30 PM	Ringers	Pedalers	Cruisers	Wheelers	Ringers	
4:30 PM	Cruisers		Jumpers	Ringers	Cruisers	
5:30 PM					Jumpers	

Boulder Indoor Cycling
 3550 Frontier Ave Suite A
 Boulder, Colorado 80301
 Phone 303-CYCLING
 Fax 303-440-3684

Fall I 2010

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AND PARENTAL CONSENT AGREEMENT

("AGREEMENT")

IN CONSIDERATION of being permitted to participate in any way in the Cycling activity ("Activity") I, for myself for personal representatives, assigns, heirs, and next of kin:

1. **ACKNOWLEDGE**, agree, and represent that I understand the nature of Cycling activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.
2. **FULLY UNDERSTAND THAT: (a) CYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS");** (b) these Risks and dangers may be caused by my own actions or inaction's, the actions or inaction's of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be **OTHER RISK AND SOCIAL AND ECONOMIC LOSSES** either not known to me or not readily foreseeable at this time; and I **FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES** I incur as a result of my participation or that of the minor in the Activity.
3. **HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE Rueda Inc., Boulder Indoor Cycling**, their respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owner and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) **FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND I FURTHER AGREE** that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which may incur as the result of such claim.

MINOR RELEASE

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF CYCLING ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEE'S FROM ALL LIABILITY CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATION AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PARENT/GUARDIAN

SIGNATURE _____ Date: ____/____/____