



**Class Registration Form: Winter I 2012**  
**8 Weeks January 2, 2012 – February 25<sup>th</sup>, 2012**

<b>Child's First Name</b>		<b>Child's Last Name</b>	
<b>Child's Date of Birth (MM/DD/YYYY)</b>		<b>Years</b>	<b>Months</b>
<b>Parent/Guardian's First Name</b>		<b>Parent/Guardian's Last Name</b>	
<b>Email Address</b>		<b>Contact Telephone Number</b>	
<b>Street Address</b>		<b>City</b>	<b>State Zip Code</b>

Cost is \$109 for an 8-week session, 20% sibling discount. Each class is 55 minutes in length. An additional \$10 yearly program membership required; renewed every November 1<sup>st</sup>. 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). We are willing to add classes and only 3 or more CycleTykes riders are required to create a new class!

**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	Pedalers	Wheelers	Wheelers	Scooters	Ringers
10:00 AM	Pedalers	Scooters	Pedalers	Pedalers	Wheelers	Scooters
11:00 AM	Scooters	Wheelers	Scooters	Scooters	Pedalers	Wheelers
12:00 PM	Free Open Riding	Free Open Riding	Free Open Riding	Free Open Riding	Free Open Riding	Pedalers
1:00 PM	Pedalers	Pedalers	Pedalers	Scooters	Pedalers	
2:00 PM	Wheelers	Pedalers	Scooters	Wheelers	Wheelers	
3:30 PM	Ringers	Pedalers	Cruisers	Pedalers	Scooters	
4:30 PM	Cruisers	Ringers	Wheelers	Wheelers	Ringers	
5:30 PM	Jumpers	Cruisers	Jumpers	Cruisers		



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

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Boulder Indoor Cycling reserves the right to amend the schedule at any point in time with little to no notice. Of course Boulder Indoor Cycling will make every attempt to communicate changes.



# 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 ANY OF THE CYCLING-RELATED ACTIVITIES offered by **Boulder Indoor Cycling** ("Activity") I, for myself, for personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of the CYCLING-RELATED ACTIVITIES offered by **Boulder Indoor Cycling** 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-RELATED 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 **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.

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.

Printed Name of Participant: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

\_\_\_\_\_  
PARTICIPANT'S SIGNATURE (only if age 18 or over)

\_\_\_\_\_  
Date

## MINOR RELEASE

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF CYCLING-RELATED 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.

Printed Name of Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18)

\_\_\_\_\_  
Date