

**“A BIKING TOUR OF GHF’S PRESERVATION HISTORY”**

MAY 2, 2010

**PARTICIPANT WAIVER AND RELEASE**

Name of Participant: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Telephone: (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_

I, \_\_\_\_\_ (print name), in participating in the above event, fully realize the dangers of participating in a bicycle ride and fully assume all risks associated with such participation, which may include, but are not limited to, serious injury, illness or death. Although I fully appreciate such risks, I desire to participate without regard to the consequences. I waive all claims against the Galveston Historical Foundation, its directors, officers, employees and volunteers (collectively “GHF”), for the acts or omissions by anyone involved with the event. I waive all claims against GHF for any damage to or theft of my personal property during my participation in the event. This waiver shall be binding on my heirs, legatees, administrators and assigns. I understand that a bicycle is a legal vehicle in the State of Texas and agree to ride in a safe manner and in accordance with all applicable law. **I HAVE BEEN ADVISED TO WEAR A HELMET.** By failing to do so, I fully assume all risks resulting from my failure to wear a helmet. I assume all responsibility for the selection of a helmet. I have no physical or mental condition that would endanger others or me if I participate in this event. I understand that no one is authorized to make statements or representations either verbally or in writing which in any way contradicts this waiver of claim. If any term or provision contained in this waiver and release is held to be invalid, illegal or unenforceable in any respect, it shall not affect any other term or provision contained herein.

**BY EXECUTING THIS WAIVER, I AGREE TO RELEASE, INDEMNIFY AND HOLD HARMLESS GHF FROM ANY CLAIM INCLUDING WITHOUT LIMITATION PERSONAL INJURY OR DEATH TO ME OR MY MINOR CHILDREN RELATING TO OUR PARTICIPATION IN THIS EVENT REGARDLESS OF GHF’S NEGLIGENCE OR FAULT.**

Participant’s Name: \_\_\_\_\_

Participant’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**I, as parent or guardian of the above named minor, hereby give my permission for my child or ward to participate in the event, and further agree to the terms above individually and on behalf of my child or ward. I agree to be fully responsible for them and agree that they are bound by the terms of this waiver. I agree to be with and supervise my child or ward at all times during the event.**

**Parent Signature (required if participant is under 18):**

\_\_\_\_\_ Date: \_\_\_\_\_