



Bike No.

Name : \_\_\_\_\_

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

Contact numbers : \_\_\_\_\_

Email : \_\_\_\_\_

Birthdate: (Month / Day / Year) \_\_\_\_\_

Age : \_\_\_\_\_

Sex: \_\_\_\_\_

(    ) Female                      (    ) Male

Who to notify in case of emergency: \_\_\_\_\_

Name: \_\_\_\_\_

**Festival Copy**

Contact No. \_\_\_\_\_

Waiver:  
 I acknowledge that cycling is an inherently dangerous sport and fully realize the dangers of participating in a biking activity, and by way of example, and not limitation, the following: the dangers of collision with pedestrians, vehicles, other riders and fixed or moving objects; the dangers arising from nature, surface hazards, equipment failure, inadequate safety equipment, and weather conditions; and the possibility of serious physical and/or mental trauma or injury associated with athletic activities. For myself, my heirs, executors, administrators, legal representatives, assignees, and successors in interest (collectively "Successors") hereby releases the sponsors of this event, the organizer and any promoting organization, property owners, law enforcement agencies, their respective agents, officials, and employees through or by which the said activity will be held (the foregoing are also collectively deemed to be the ORGANIZERS ) FROM ANY and all rights and CLAIMS INCLUDING CLAIMS ARISING FROM THE ORGANIZERS' OWN NEGLIGENCE, which I have or which hereafter accrue to me and from any and all damages which may be sustained by me directly or indirectly in connection with, or arising out of, my participation in the events of the ride, or travel to or return from the event. I understand and agree that situations may arise during the event, which may be beyond the immediate control of the officials or organizers, and I must continually ride so as to neither endanger myself, nor others. I accept responsibility for the condition and adequacy of my equipment. I will compete using a helmet, which satisfies the requirements of the Organizers Racing Rules or Regulations and that can protect against serious head injury, and assume all responsibility and liability for the selection of such a helmet. I have no physical or medical condition, which to my knowledge would endanger myself or others if I participate in this event or would interfere with my ability to participate in the event. Should I, the undersigned, be made aware of any circumstance relating to the foregoing from the time of execution hereof, I shall immediately inform the Organizers and furnish them all information required, and information, which I believe the Organizers, should be informed.

Signature of Registrant / Parent's Signature if below 18 years old

Receipt # \_\_\_\_\_

**Registrant's Copy**



**Dress up your bike, come in your best all-pink ensemble and ride around Filinvest City as we raise awareness for breast cancer prevention and survival.**

**Ride Date: October 10 (Saturday), 2015 7AM ,  
 Assembly Point: River Park.  
 Registration Fee: P500 (inclusive of Ride Kit)  
 Registration is until Oct. 8, 9PM, Customer Service**

**Prizes to be awarded to the Top 3 in Best Pink Costume and Best in Pink Bike Dress-up.  
 Register now!**

*Ride kit will be available by October 5*

*Proceeds will go to the iCanServe Foundation, Inc,  
 Stage Zero by Project Pink and the  
 Asian Hospital Charities, Inc.*

*In Cooperation with:*



Name: \_\_\_\_\_

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

Contact No.: \_\_\_\_\_

OR No. \_\_\_\_\_