## Tree City Rolling Tour / Century Registration Form

Name:			_	
	State:			
Phone:	Cell Phone:			
Email:			(PLEASE P	RINT CLEARLY)
DOB:	Age:		M / F	
Pre-registration Pre-registration Day of registrati	up to March 31 is: <u>\$3</u> from April 1–30 is: \$ from May 1–June 27 on is: \$50 (Youth 13 are free (PLE/	40 (Youth 1 is: \$45 (Yo -17 is \$40)	3-17 is \$30 outh 13-17 i	)) s \$35)
paying.	irts may be available t	-		
	ck preferred size: Sm ck preferred size: 2)			_ Xlarge
Which ride are yo	ou riding? 16 34	67	flatter 67_	100
Where did you he	ear about our ride?			
Have you rode o	ur ride before? Yes o	r No (circle	one)	
<u>Please sign Waiv</u>	<u>ver (Must Sign)</u>		T	

In consideration of the acceptance of my registration for the Tree City Rolling Tour Ride. I hereby waive, and release any and all rights and claims for damages I have against the sponsors, volunteers and the Decatur County Family YMCA for any injury that I may suffer during my participation in the Tree City Rolling Tour Fundraiser scheduled to be held on June 29, 2024. I attest that I am physically fit and have trained for this event, and that I am entering this event of my own free will.

Signature \_

Would you allow us to contact you by text next year when registration is open? Please circle one: YES or NO