PARTICIPANT AND VOLUNTEER ACCIDENT WAIVER AND RELEASE OF LIABILITY

2024 Member Family Bike Night at the Los Angeles Arboretum, September 13th, 2024

I acknowledge that this athletic event requires that I am physically fit enough to participate or volunteer in this event. I acknowledge that I have sufficiently trained for participation in the event and have not been advised otherwise by a qualified medical person. I acknowledge that this is a bike ride and not a race. However, there are risks associated with any bike ride. Such risks include but are not limited to those caused by terrain, facilities, temperature, weather, conditions of athlete's equipment, intentional or negligent actions of other people including but not limited to participants, volunteers, spectators, event officials, event monitors, and lack of hydration. I hereby voluntarily assume all the risks of participating and/or volunteering in this event. I realize that liability may arise from negligence or carelessness on the part of persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I have read and understood the description of the ride and the code of conduct provided on http://www.arboretum.org and *Rules of the Road* for the event and agree to abide by them including without limitation the requirements where a Consumer Product Safety Commission-approved bicycle helmet, by all other rules and regulations established for the Family Bike Night event, and by the California Vehicle Code.

Rules of the Road

- All participants must sign waiver
- Bike helmets and closed-toe shoes are mandatory
- Stay in the designated areas
- Everyone rides counter-clockwise
- Slower cyclists stay to the right
- 5 MPH speed limit, Racing is prohibited
- All children must be accompanied by an adult while riding
- Respect the wildlife
- Human-powered bikes only; No electric or motorized bikes
- No skateboards
- Scooters and tricycles are permitted. Knee pads & elbow pads are recommended.

In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administers, heirs, next of kin, successors and assigns as follows:

- (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me at or during my traveling to and from this event. THE FOLLOWING ENTITIES OR PERSONS: Los Angeles County Arboretum and Botanic garden, its employees; the County of Los Angeles Department of Parks and Recreation, its employees, agents, officers, the Los Angeles Arboretum Foundation, Inc, its employees, agents, officers and directors.
- (B) IDENTIFY AND HOLD HARMLESS the entities or persons mentioned in (A) above, from any and all liabilities or claims made by other individuals or entities as a result of my actions during this event. I hereby consent to receive medical treatment that may be deemed advisable in the event of injury, accident or illness during the event. I agree to follow all California Vehicle Code traffic laws. I understand that this event or related activities may be photographed, filmed, videoed or otherwise have my likeness or voice recorded. I agree to allow my photo, video or film or sound likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and/or assigns in perpetuity.

I acknowledge that this accident waiver release of liability form will be used by the event organizers, sponsors, government entities and other organizers and shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. I agree that the venue for any legal proceedings is Los Angeles, California. I hereby certify that I have read this document and understand this accident waiver and release of liability form will govern my actions and responsibilities stemming from my involvement in this event in any way including participation in or volunteering for this event.

I understand that I am releasing the named entities from claims based on negligence.

Participants Name (18+) please print	Participa	nts Signature (18+)
Name (First/Last)		
Child Participants Name (under 18) please print		
Name (First/Last)		
Parent or Guardian's Name (Print)		
Parent or Guardian's Signature		
Emergency Information (Print)		
Emergency Contact Name	Relationship	Phone Number

MEMBERSHIP ID