

SABRE 1999 Registration Form

One Rider per form, please. Copies are happily accepted.
Please write legibly.

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Age: _____

Emergency Phone for Ride Day: _____

I plan to ride (check one): ☐ 65 ☐ 35 ☐ 15 miles

T-Shirt size (if ordered): ☐ S ☐ M ☐ L ☐ XL

Registration Fees

\$12 by 9/18, \$17 after 9/18 \$ _____

T-Shirt (\$8): \$ _____

Donation for Hostel: \$ _____

Total: \$ _____

Payment:

☐ Check made payable to "Pittsburgh AYH"

☐ Visa ☐ Mastercard ☐ Discover/Novus

Card # _____ Exp Date: _____

Signature: _____

Mail to: AYH - SABRE 1999
830 E. Warrington Avenue
Pittsburgh, PA 15210-1595

Where did you get this brochure?

(on the internet) _____

**You must sign the liability on this form
to participate!**

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Printed on recycled paper

SABRE 1999 Waiver



In consideration of your acceptance of my application for entry in the SABRE Bicycle Tour, I, the undersigned, for myself, my heirs, executors, administrators and assigns, waive and release any and all claims for damages, for death, personal injury or loss of property I may have, or which may accrue to me as a result of my participation in the SABRE Bicycle Tour.

I, the undersigned, discharge, and release the promoters, the sponsors, Hostelling International, Pittsburgh Council, American Youth Hostels, Inc. and their respective agents, boards, commissions and any other involved municipalities, and employees and representatives of the foregoing from all liability, arising out of or connected in any way with my participation in this event, whether or not caused by the negligence of any of the above parties.

I acknowledge that the SABRE Bicycle Tour involves riding on public roads which are not closed to other traffic and which may have other hazards including hills, potholes, loose gravel, and sewer grates. My participation is voluntary and is done at my own risk. I voluntarily assume all risks of loss, damage or injury that may be sustained while participating in this event. I attest that I am physically fit and sufficiently trained for the completion of this event. I hereby consent to and permit emergency treatment in the event of injury or illness while participating in the event. I understand and agree that medical or other services rendered to me by, or the insistence of any of the above parties is not an admission of liability to provide or to continue to provide any such services, and is not a waiver by any of said parties of any right hereunder.

I understand that serious accidents occasionally occur during bike rides and that participants in bike rides occasionally sustain mortal or serious injury as a consequence thereof. Nevertheless, I agree to assume these risks and to release and indemnify and hold harmless all the persons mentioned above who might otherwise be liable to me (or my heirs or assigns) for damages of whatever kind or nature. I attest that the bicycle and equipment I will use in the SABRE Bicycle Tour are in good mechanical condition. I agree to wear a helmet meeting either the ANSI Z90.4 standard or Snell Memorial Foundation 1984 standard while riding in this event. I agree to abide by the rules of the event as established by the promoting organization and to obey the directions of the officials.

I hereby grant full permission to Pittsburgh Council, American Youth Hostels and/or its agents to use photographs, videotapes, motion pictures, or any other record of this event, including my name, likeness and/or voice for any legitimate purpose.

**I have read and understand everything written above
and voluntarily sign this agreement.**

Signature of Participant

Date

Signature of Parent / Guardian
(If registrant is under 18)

Date