

Date: / /

Rs.200/-

To,
The Cycling Club of Baroda/Baroda Cyclist Club,
Vadodara.

Event: Tour De Pavagadh

Registration/Declaration

I understand and agree that my participation in this event is conditional upon my execution of this document.

I understand that The Cycling Club of Baroda or its organisers takes no responsibility and would not be liable for any consequence to me resulting from participation in the said activity of The Cycling Club of Baroda and am voluntarily participating in the same.

I assume full responsibility for any consequence whatsoever.

I am fully aware that this event of The Cycling Club of Baroda demands physical endurance and skill and I declare that I am medically fit and otherwise competent to undertake the same.

I understand that all applicable rules for participation must be followed and that ***SOLE RESPONSIBILITY FOR MY PERSONAL SAFETY REMAINS WITH ME***, including my physical and emotional preparation and fitness to participate in this event

Name : _____

Address : _____

Contact No. : _____

Date of Birth : _____

Blood Group : _____

Emergency No: _____

Relation of the Guardian: _____
(In case of children below 18 yrs)

Category of Participation (Please tick against your category)

40 kms (Gala Ride), 75 kms (endurance), 104 kms (Challenge)

Signature of the Participant

Signature of the Guardian