

SAGBRAW



Schramms Annual Great Bicycle Ride Across Wisconsin

TOUR REGISTRATION
July 31-August 6, 2010

OFFICE USE ONLY
Check #:
Date:
Amount:

Each participant must fully complete (1) one form and must use original and authentic signature. All participants must register, including Non Riders.

 **Signup online at www.bikewisconsin.com. It's fast and easy!**

Last Name	First	Middle Initial
Address		
City	State	Zip
Phone	Email	
Emergency Contact Name <i>(Person not on tour)</i>		Emergency Contact Phone
Circle one: M F Birth date: / / Age _____ <i>(Cyclists must be born before 7/31/02)</i>		

Tour Fees <i>Circle choices</i>	Starts May 1, 2010	
Full Week*	Youth 8-17 Adult 18-64 Senior 65 and older	\$95 \$306 \$291
Partial Week*	Youth 8-17 Adult 18 and over	\$20 \$55 X _____ # of days = total \$ _____
Non Rider* accompanying cyclist	\$50 Youth	\$60 Adult

Tour Options <i>Circle choices</i>			
Rider Services Options Towel \$24 Chair \$42 Towel & Chair \$66 <i>Fresh, clean, daily towel & washcloth</i> <i>Cozy camp chair for relaxing</i> <i>Fresh towel & cozy-chair daily</i>	On-Tour Vehicle Permit Option \$35 Private vehicle traveling with the tour must be registered and display a Vehicle Permit. Permits will be issued at registration.		
Motel Luggage Shuttle Option Transport of your luggage to and from Official Motels only. All accommodations are at your own expense. Price is per person. Check website or Email for list of Official Motels. \$180 week or \$30/day X _____ # of days = _____ total	Long Term Parking Option \$6 Park your vehicle at Columbus, (tour start), for the duration of the tour. Parking is at your own risk. Pass will be issued at staging area.		
Rider Services Tent Service Option Tent, chair, towel and washcloth, daily setup/takedown. Air mattress/pad not included, so bring your own. For double and jumbo tents indicate your tent mate: _____ \$240 single \$300 double \$360 jumbo	Pre-Ride Camping Option \$12 Friday 7/30 at Columbus, (tour start), price is per tent.		
Delicious Meal Plan \$108 6 breakfasts & 5 dinners \$60 dinner only \$48 breakfast only Vegetarian Y N \$86 kids 12 and under \$50 kids 12 and under \$36 kids 12 and under			
SAGBRAW® Tour Jersey \$70 ___ S ___ M ___ L ___ XL ___ XXL <i>Limited quantities</i>			

_____ **Free T-shirt** size (short sleeve) ___ S ___ M ___ L ___ XL ___ XXL _____ **total**

www.bikewisconsin.com

Questions? email: info@bikewisconsin.com or call 608.843.8412



Is this your first week-long event? **Y N** How many years have you participated on SAGBRAW®? _____

Would you like to receive the **Bike Wisconsin® e-newsletter?** (Provides you with the latest tour updates by email.) **Y N**

Are you a member of a Bike Club? Name _____

What type of bike will you be riding? upright recumbent trike tandem

Are you a part of a group discount? **Y N** Name of Group Leader _____ For more info contact us.

Volunteers needed: Riding and Non-Riding Positions!

**MD RN EMT HAM radio operators
SAG drivers Security General Help**

Discounted registration! You must be pre-approved.

Email volunteers@bikewisconsin.com or call 608-843-8412

____ Yes, I would like to learn more about **SAGBRAW® On-Call Emergency Management Team** Are you an experienced/certified professional who could assist us in the event of an emergency?

**Medical Law Enforcement Firefighter Communications
Counseling help (Circle your expertise.)**

Email us at volunteers@bikewisconsin.com or call 608-843-8412

SAGBRAW®, Release and Waiver of Liability:

1. In signing this release, I acknowledge that I understand the nature of SAGBRAW® specifically and bicycle touring generally ("Activity") and represent that I am qualified, in good health, and in proper physical condition to participate in the Activity. I further acknowledge that the Activity will be conducted over public roads and facilities open to the public during the Activity and upon which the hazards of traveling are to be expected. I further agree and warrant that if, at any time, I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. Further, I acknowledge and understand that the scope of the activity includes, but is not limited to bicycling, equipment transport, personal transport, food services, sleeping and personal care facilities and arrangements and otherwise.

2. I fully understand that (a) the activity involves risks and dangers of serious bodily injury, including permanent disability, paralysis and death ("Risks"); (b) these risks and dangers may be caused by my own actions, or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or the negligence of the "Releasees" named below; (c) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time.

3. The foregoing understood, I hereby release and waive any and all claims against, Two Bicycles and a Map, Ltd., major sponsors, cooperating organizations, and any other parties connected with this event in any way, ("Releasees") singularly or collectively, and further hold harmless and indemnify such releasees from and against any liability, claims of negligence, misadventure, harm, loss, inconvenience or damage hereby suffered or sustained as a result of participation in SAGBRAW®, or any other activity associated therewith. The foregoing notwithstanding, this is NOT a release and waiver of intentional or reckless acts. Such release, waiver, hold harmless and indemnity shall apply to my own claims and /or claims of third parties, relating to my participation in this event. This waiver is made in the state of Wisconsin, the laws of Wisconsin govern its terms and any action to interpret or enforce it shall be brought in Dane County in the State of Wisconsin.

4. I hereby consent to and permit emergency treatment, in the event of injury, illness or death. Two Bicycles and a Map Ltd. reserves the right to decline accepting or retaining any tour participant whose health or actions impede the operation of the tour or welfare of other tour participants. I give full permission for use of my name and photograph, motion pictures, videotapes, recording or other record of this event for any legitimate purpose.

5. I have read this agreement, fully understand its terms, understand that I have given up substantial rights by signing it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of liability, within its terms, to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance notwithstanding, shall continue in full force and effect.

The undersigned acknowledges having read and agreed to the terms of the foregoing Release and Waiver of Liability agreement. In this regard, the undersigned acknowledges and agrees that if the terms of the agreement are not acceptable the undersigned has the choice and option to forego participation in this voluntary event.

Signature (Signatures of both parents or guardians if under 18)

Date(s)

Tour fee*, Daily fee* and Non Rider participant fees* all include your choice of indoor gym or outdoor camping, indoor showers & NEW SHOWER TRUCK at overnight sites, "art" t-shirt, personal wearable safety triangle(yours to keep), cue sheets & maps, daily SAG support, daily luggage support, luggage tags, frame numbers, cool nighttime entertainment, mechanical bike support, daily rest stop (fundraiser for local groups), water stops, marked cycling route, celebration lunch and tons of fun!

Cancellation Policy: You may cancel your registration for a full refund, minus a **\$60 per person** processing fee, on or before the **Tour Refund Deadline of June 31, 2010**. All refund requests must be made in writing by sending an email, a fax or a letter. No refunds will be given after the Tour Refund Deadline for any reason. After the Tour Refund Deadline you may **only sell or transfer** your registration package to someone else. **Contact us for more information.**

We highly recommend you purchase Trip Cancellation Insurance. Consult your local insurance agent.

Have you.....1) Signed and dated the Release and Waiver of Liability? **Y N**

2) Enclosed your check payable to the **SAGBRAW®?** **Y N** No Canadian Personal Checks

3) This registration form must be postmarked by the required date.

Mail to: SAGBRAW®, P.O. Box 3142, Madison, WI 53704-0142 Please do not fax form.

Thanks for registering! A confirmation will be sent. A Pre-Ride Newsletter will be sent out in Spring. **Get set to have fun!**

Be sure to check out our other tours **GRABAAR®** and **Bike Northwoods Tour** at www.bikewisconsin.com

