



Registration Form

Rider (\$50 per rider)

Name: _____

Address: _____

Phone: _____ Email: _____

Emergency Contact: _____ Phone: _____

Passenger (\$25 per passenger)

Passenger Name: _____

Address: _____

Phone: _____ Email: _____

Emergency Contact: _____ Phone: _____

Waiver: In consideration of being permitted to participate in The ConKer Ride, for myself, heirs, and next of kin, I agree to hereby RELEASE, WAIVE, DISCHARGE, AND NOT SUE any member of The ConKer Ride or Friends for a Cure organizing committee, The Princess Margaret Hospital Foundation, SickKids Hospital Foundation, volunteers, sponsors including ConKer Construction, RDA Insurance Inc, Envy Rides and Yamaha, and any other parties that may be associated with this Event. I agree to Indemnify, Save and Hold Harmless the releases and each of them from any loss, liability, damage, bodily injury, death or property damage arising from the Event. I further give my permission for the free use of my name and picture for media and marketing materials related to this Event.

I have read the release and Waiver of Liability and fully understand its terms and intend my signature to be a complete and unconditional release of ALL LIABILITY.

Signature & Date (driver): _____

Signature & Date (passenger): _____

Please mail form with a cheque payable to **“FRIENDS FOR A CURE”** to:
ConKer Construction Corp.
860 Progress Ct.
Oakville, ON L6L 6K1

To pay by credit card and for online fundraising, please register at www.theconkerride.com