



14TH ANNUAL TOUR DE ELIZABETH APPLICATION

PRINT APPLICATION OUT AND SEND WITH FEE TO GROUNDWORK ELIZABETH (ADDRESS SHOWN BELOW) OR REGISTER ONLINE AT:

www.groundworkelizabeth.org, www.elizabethnj.org, or www.brownpapertickets.com



in partnership with



On May 21st, 2017, join Mayor Chris Bollwage and Groundwork Elizabeth for the 14th Annual Tour de Elizabeth. The 15 mile cycling event welcomes all skill levels and is hosted by the City, Groundwork, the Union County Board of Chosen Freeholders HEART grant program, the Greater Elizabeth Chamber of Commerce, EDMO, the Elizabeth Avenue Partnership, the Historic Midtown Special Improvement District, the Elizabeth Development Company's Urban Enterprise Zone Program, and Shaping Elizabeth.

FREE PARKING AVAILABLE or RIDE YOUR BIKE TO EVENT

HELMETS ARE REQUIRED, early pre-registrants get hat and t-shirt.
BICYCLES EQUIPPED WITH TRAINING WHEELS ARE NOT PERMITTED

For directions to 50 Winfield Scott Plaza, Elizabeth, N.J. go to GOOGLE MAPS or MAPQUEST

Ride starts at 50 Winfield Scott Plaza, in front of Elizabeth City Hall

First Name _____ Last Name _____
Street Address _____
City, State, Zip Code _____
Applicant Age _____ Telephone _____
Email _____
Please check rider group: Fast Road: ___ Moderate: ___ Family: ___

ENTRY FEES: \$22.50 before May 13, 2017 \$27.50 after May 15, 2017

Make checks payable to: Groundwork Elizabeth
Mail application and check to: Groundwork Elizabeth Special Events
c/o Elizabeth Development Company
205 First Street
Elizabeth, NJ 07206

Must sign in on day of event: Registration opens at 7:30 A.M. – Ride begins at 9:00 A.M. sharp!

FREE RAFFLE TO FOLLOW – MUSIC COURTESY OF COLORBLIND PRODUCTIONS

I acknowledge that participating in the Tour de Elizabeth Bicycle Ride is a potentially hazardous activity and that I should not enter and participate in any manner unless I am medically and physically able and trained. I further acknowledge that I and I alone, am solely responsible for my personal health and safety and the personal property I bring with me. I understand that I will be using public streets and facilities where hazards may exist and I am aware and appreciate the risks that may result. I am also aware that accidents may occur during the Tour and that I may be seriously injured as a result.

I verify that I am physically fit and my physical condition has been, or will be, verified prior to the Tour by a licensed medical practitioner. If I am a rider, I verify that I have or will train sufficiently to participate in the Tour. I, however, as a result of my participation in the Tour I require medical attention, I have my consent to the authorized medical personnel of the Tour to provide such medical care as is deemed necessary by such authorized personnel. I also understand that I will be financially responsible for the cost of any medical treatment. I verify that I have adequate medical insurance or will have such insurance at the time of the Tour.

I will abide by all rules and regulation established by the Tour organizers and personnel as well as State and local vehicle codes. I agree to wear a properly fitted and adjusted ASTM/ANSI/CPSC or Snell certified helmet which riding.

In consideration of acceptance of this entry, I intend to be legally bound for myself, my heirs, assign, next of kin, personal representative, executors and administrators, waive and release, Groundwork Elizabeth, the Tour de Elizabeth and the City of Elizabeth, their organizers, volunteers, designated beneficiaries, sponsors, officials, service providers, participating clubs, organizations, and all of their respective representatives, successors, directors, officers, agents, employees, member and assigns from all liability and claims arising from injury, death, illness, property damage, or any loss suffered or sustained by me, which is any way associated with my participation in travel to and from or any activity associated in any way, whether foreseeable or not, with the tour.

I certify that I am at least 18 years of age. I certify that if I am not 18 years of age, I certify that my legal guardian has read the aforementioned waiver and agrees to the terms of the same and will execute the same below.

Participant: _____ Legal Guardian & Relationship to Rider: _____

