Wheels for Meals Bicycle Poker Ride for All Ages Meals on Wheels of Chemung County, Inc.

409 William Street, Elmira, NY 14901 Phone: 607-734-9535 Fax: 607-734-5267 Email: info@mealsonwheelschemung.org



WHEELS FOR MEALS SPONSOR FORM

FIRST NAME LAST NAME						
ADDRESS						
CITY	STATE	ZIPCODE				
EMAIL TELEPHONE TELEPHONE						
TEAM NAME TEAM CAPTAIN						
I have enclosed my Company Matching gift forms YES NO						
SPONSOR'S NAME	ADDRESS		\$25	\$15	\$5	OTHER
My own donation is:						
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	+					
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Pledges are due within 30 days of the Wheels for Meals Ride. Enclosed Cash, checks, money orders \$						
Make Checks payable to Meals of Please collect all contributions in advantage of the contributions in advantage of the contributions of the contributions in advantage of the contributions of the contribution of the cont	n Wheels of Chemung Co.					
Waiver and Indemnification: By signing below, I acknowledge that I have read this and I understand its intent. I further agree for myself, or as the guardian for a minor, and/or as the minor's executor, administrator and/or representative, do hereby agree and will abso and hold harmless Southern Tier Bicycle League, Meals on Wheels of Chemung County, Inc., corporate sponsors, cooperating organizations and any other parties connected with this event in any way together with their respective successors and assigns the "sponsors" singly and collectively, from and against any liability whatsoever, which may result from or be connected in any way to my participation in Wheels for Meals. In addition to absolute and unqualified release from all liability, I hereby represent that I am physically capable of participating in this event, that I will observe all applicable traffic and evet rules, and that I will conduct myself in a safe and prudent manner while participating in the event and I hereby absolve and hold harmless the sponsors from any injury, loss or harm I may sustain because of any breach of these representations. I understand the Southern Tier Bicycle league and Meals on Wheels reserves the right to refuse or dismiss anyone that may cause any disturbance or hindrance in any manner, which could jeopardize the success of Wheels for Meals. I hereby consent to and permit emergency treatment in the event of injury or illness while participating in this event. I also give permission to Southern Tier Bicycle League and Meals on Wheels to use my name and any photograph taken of me during the event in any promotional materials, publications or internet. If you are an adult registering minor, you are accepting these terms. MUST BE SIGNED IN ORDER TO PARTICIPATE.						
Participant's signature Printed I	Name Date					
Parent/Guardian's signature Printed	Name Date					