## **2017 Grand Illinois Bike Tour Registration Form** Complete and sign one form per rider. Copies are acceptable.

Name	M/FAge
Address	
CityState	ZipPhone
E-mail	Included T-shirt size: S M L XL XXL
Emergency Contact: Name:	Phone
How did you find out about the Grand Illinois Bike Tour?_	
Early Bird Rates — by November 30	Regular Rates — after December 1
\$475 Basic	\$500 Basic
\$440 Ride Illinois Member	\$465 Ride Illinois Member
\$350 17 years and under	\$350 17 years and under
Optional Motel Package (in addition to registration fee	e above)
\$610 Single Occupancy	\$345 Double Occupancy (per person)
Roommate name, if known	
Optional Fundraising/Donation Program	
Check here if you agree to raise at least \$100 for with a personal online fundraising page and help	r the Grand Illinois Bike Tour. Ride Illinois will make it easy ful tips on how to reach out to family and friends.
\$ Donation in lieu of fundraising to support Ride Illi	nois' advocacy work to make biking better in Illinois.
\$ Extra T-shirts (\$10 each) size: S M L	XL XXL
\$ Total check amount	
Make checks payable to Ride Illinois. Mail to: Ride Illi	nois, 2550 Cheshire Dr., Aurora, IL 60504
Tour, as in any bicycling or athletic event, may involve hazardous activity. I agree occurring prior to, during, or subsequent to the actual ride, including but not limited contact with other participants, equipment failure, inadequate safety equipment, throtor vehicles of all types and descriptions, collision with other riders, pedestrians of the existence of the risks and hazards. I, for myself, and anyone acting on my b	ne effect of weather including extreme temperature or conditions, traffic, contact with s, animals, fixed objects, or conditions of the road. I waive any and all specific notice lehalf, agree to absolve Ride Illinois and all organizers, sponsors and their representor inconvenience suffered as a result of taking part in the Grand Illinois Bike Tour or signals. In addition, I hereby grant permission to Ride Illinois and its authorized
I agree to the above waivers and disclaimers. (require	ed)
Signature:	Date:
Signature of parent or guardian for rider 17 years of age of	or under:
<b>Share the Road Agreement:</b> I agree not to ride two or more other rules of the road, which apply to both cars and bicycles. R	e abreast when doing so may impede traffic. I agree to follow all ide Illinois urges you to complete a quiz at BikeSafetyQuiz.com.
Cancellation/Refund Policy: I have read and accept the re-	vised cancellation and refund policy.
Signature:	