

The Bicycle Tree Hold Harmless Agreement

I, the undersigned, understand and agree that as a participant in activities of The Bicycle Tree, I am responsible for using tools, repairing bicycles, and otherwise conducting myself in a manner that prevents injury to myself and others. I hereby waive all claims or causes of action against The Bicycle Tree, its volunteers, Social and Environmental Entrepreneurs (SEE), SEE staff, and SEE board members (all of which are collectively hereinafter referred to as "The Bicycle Tree,") arising out of my participation in The Bicycle Tree's activities, and hereby release, hold harmless, and discharge The Bicycle Tree from all liability in connection therewith.

Knowing, understanding, and fully appreciating all possible risks, I hereby expressly, voluntarily, and willingly assume all risks and dangers associated with my participation in The Bicycle Tree's activities. Some of the risks and dangers are listed below. I understand this list is not exhaustive.

List risks here (e.g.): Hitting, gouging, or cutting with tools; travel to and from activity meeting location, bicycle accident, car accident, pedestrian accident, tripping, falling, etc.

Furthermore, I agree to use my personal medical insurance as a primary medical coverage payment if accident or injury occurs.

I have read this waiver and release and understand the terms used in it and their legal significance. This waiver and release is freely and voluntarily given with the understanding that right to legal recourse against The Bicycle Tree is knowingly given up in return for allowing my participation in the activity.

My signature on this document is intended to bind not only myself but also my successors, heirs, representatives, administrators, and assigns.

_____ Participant Name (please print)	_____ Participant Signature	_____ Date (mm/dd/yy)	
_____ Parent/Guardian Name (please print) (if participant's age is under 18)	_____ Parent/Guardian Signature	_____ Date (mm/dd/yy)	
_____ Address	_____ City	_____ State	_____ Zip
_____ Emergency Contact Name	_____ Emergency Contact Relationship to Participant	_____ Emergency Contact Phone	

(Staff use only)

_____ Witness	_____ Witness Signature	_____ Date (mm/dd/yy)
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The Bicycle Tree is a project of Social and Environmental Entrepreneurs,
a tax-exempt public charity according to section 501(c)3 of the
Internal Revenue Code