

**PEDAL ACROSS WISCONSIN, INC.**  
**NORTHWOODS Tour July 21- July 27 2019**

Please complete registration, read and sign waiver, and return to:

**PEDAL ACROSS WISCONSIN INC.**  
**1205 WESLEY AVENUE**  
**EVANSTON IL 60202**

**All riders/non riders must sign their own waiver.** Multiple riders may share registration form.

**Please DO NOT contact hotels.** Your room is already reserved and held for late arrival when you sign up for any PAW tour. Only contact hotels to reserve nights not included in the tour.

\_\_\_\_\_ M/F (circle) Age \_\_\_\_\_  
First name Last name

\_\_\_\_\_ Street City State Zip

\_\_\_\_\_ Home Phone Cell Phone **Your email (PLEASE PRINT)**  
*Email confirmation will be sent*

\_\_\_\_\_ Emergency Contact & Phone

**Your Bicycle type:** Road Bike \_\_\_ Trike \_\_\_ Tandem \_\_\_ Recumbent \_\_\_ E-Bike \_\_\_

**Note: Bicycle rental not included in tour fees. For rental info contact: Mel's Trading Post: 715-362-5800 melstradingpost.net (located 1 mile from Quality Inn Rhinelander)**

**Roommate:** Do you need PAW to help you find a roommate? YES \_\_\_ NO \_\_\_

If you have a roommate, please provide name here: \_\_\_\_\_

**Group meals:**

Do you have special dietary needs or intolerances that requires a special meal if possible?

Please check all that apply: 1. Gluten intolerance \_\_\_ 2. Vegan \_\_\_ 3. Vegetarian \_\_\_

First tour with Pedal Across Wisconsin? If so, how did you hear about us?

\_\_\_\_\_ Friend: Name: \_\_\_\_\_ Bike Club \_\_\_\_\_

\_\_\_\_\_ Internet: Website \_\_\_\_\_ Other \_\_\_\_\_

**FOR PAW USE ONLY:**

Deposit: \$ \_\_\_\_\_ # \_\_\_\_\_ Balance: \$ \_\_\_\_\_

Date added: \_\_\_\_\_

**TOUR FEES:**

**All Tour Fees Include:** Hotel Sunday July 21<sup>st</sup> thru Saturday morning July 27<sup>th</sup>, 3 Group Dinners, 6 Continental Breakfasts, Baggage Transport, Maps/Q-sheets, on-road Food Stops, Marked Roads, Sag Support, Social Hours and weekly parking at Quality Inn Rhinelander WI.

# \_\_\_\_\_ **Adults @ \$ 855.00 Per Rider** (Based on 2 in a room; each person pays \$855.00)  
**For PRIVATE ROOM add \$525.00** (No roommate; 1 person per room)

**NOTE:** Ride begins Sunday July 21<sup>st</sup>. PAW has secured a group rate for hotel rooms **Saturday July 20<sup>th</sup>** the night before tour begins.

# \_\_\_\_\_ **Adults: Hotel Room Saturday July 20<sup>th</sup> @ Quality Inn Rhinelander WI.**  
Includes warm-up Bicycle Ride, Ice-Cream Social, route brief & parking  
**\$63.00/per person** Assumes 2 persons per room. (Price includes tax)  
**\$126.00 Private Room (No Roommate)** (Price includes tax)

# \_\_\_\_\_ **Non-Riders: @ 215.00 per person:** Non-riders may attend when sharing room with rider. Rider must add Private Room Fee. Non-rider fee includes all group meals, social hours, ice-cream socials & access to food stop snacks. Non-riders are responsible for their own transportation and baggage transport.

**PAW JERSEYS & T-SHIRTS!**

For pictures and complete description see link on Registration page

**PAW JERSEY:** Men’s OR Women’s: M L XL 2X 3X..... @ 60.00 each \$ \_\_\_\_\_

**TEES:** Lightweight, high-visibility safety Yellow & Orange, Blue, or Pink, (All T-shirts are unisex except Pink T, which is ladies sized).

Long sleeve: Yellow-Size: S M L XL 2X      **Quantity:** \_\_\_\_\_ **@ \$15.00 each \$** \_\_\_\_\_  
Short sleeve: Yellow-Size S M L XL 2X      **Quantity:** \_\_\_\_\_ **@ \$15.00 each \$** \_\_\_\_\_  
Short sleeve: Blue-Size S M L XL 2X      **Quantity:** \_\_\_\_\_ **@ \$15.00 each \$** \_\_\_\_\_  
Short sleeve: **PINK (Womens T)** S M L XL      **Quantity:** \_\_\_\_\_ **@ \$15.00 each \$** \_\_\_\_\_  
Short sleeve: Orange S M L XL 2X      **Quantity:** \_\_\_\_\_ **@ \$15.00 each \$** \_\_\_\_\_  
Short sleeve White Florida Keys S M L XL 2X      **Quantity:** \_\_\_\_\_ **@ \$15.00 each \$** \_\_\_\_\_

**TOTAL TOUR FEES \$** \_\_\_\_\_

**DEPOSIT ENCLOSED** (Minimum 50% of total tour fees) \$ \_\_\_\_\_  
**(Check payable: Pedal Across Wisconsin Inc.)**

**BALANCE DUE JUNE 18<sup>th</sup> \$** \_\_\_\_\_

**Cancellation Policy** per person: Through June 1<sup>st</sup> 2019: \$90.00. After June 1<sup>st</sup>, the maximum refund will be equal to the total returned by hotels and restaurants to PAW. **IF YOU HAVE A ROOMMATE**, the private room fee of \$485.00 (plus \$63.00 for July 20<sup>th</sup> will be assessed, in addition to these cancellation fees, if no replacement can be found.

**Make checks payable to Pedal Across Wisconsin, Inc. Sorry, credit cards not accepted.**

**Pedal Across Wisconsin, Inc. Release and Waiver of Responsibility:**

In signing this release, I acknowledge that I understand the nature of the Pedal Across Wisconsin, Inc. tour ('activity') and that it is a potentially hazardous event, and attend it of my own free will and choice. In choosing to attend Pedal Across Wisconsin, Inc.'s activity and any related events or activities, I fully assume all risks, whether before, during or after the Pedal Across Wisconsin, Inc. activity or related activities. These include, without limitation, collision with pedestrians, vehicles, other riders, sponsors, promoters, or drivers, and dangers arising from falls, camping, theft, road surface, equipment failure, inadequate safety equipment, weather conditions, as well as the possibility of physical and/or mental trauma, mental injury, emotional stress, serious bodily injury resulting in disability, death and paralysis.

I realize Pedal Across Wisconsin, Inc. activities require physical conditioning, and I represent myself that I am in sound medical condition, capable of participating without risk to others and myself. I have no medical impediment that would endanger others or myself. I waive any and all specific notices of risks. I agree that maps, directions, leaders and road markings are provided for my convenience only, and not to guarantee a safe route or trip. I understand and agree that a situation may arise during the Pedal Across Wisconsin, Inc. activity, which may be beyond the control of the sponsors, promoters, or organizers, and agree to participate so as not to endanger others and myself.

I understand that any route or activity chosen as part of our outdoor adventure may not be the safest, but has been chosen for the interest or challenge provided. I understand the route requires bicycling on public roadways, and in bad weather, and that cyclists have been hospitalized and/or killed because of accidents that are either their responsibility or the responsibility of someone else. I further agree that I will bear and assume all expenses incurred in any accidents, illness, or loss of any kind. I further agree and warrant that if, at any time, I believe conditions to be unsafe, I will immediately discontinue further participation in the activity. I hereby consent to and permit emergency treatment in the event of injury, illness or death.

I give full permission for use of my name and photograph, motion pictures, video tape, recording, written comments or opinions, or other records of this event for any legitimate purpose. Pedal Across Wisconsin, Inc. reserves the right to decline accepting or retaining any tour participant whose health or actions impede the operation of the tour, or welfare of other tour participants. An approved (ANSI or Snell or equal) helmet is strongly recommended for use by all participants while riding bicycles. I agree to the terms and conditions of the Pedal Across Wisconsin, Inc. cancellation policy. I park my vehicle at my own risk and acknowledge the safekeeping of my bicycle as my responsibility.

I have read this agreement, fully understand all the terms it contains, and understand that I have given up substantial rights by signing it freely, and without any inducement or assurance of any nature, and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law, and agree that if any portion of this agreement is held to be invalid, the balance notwithstanding, shall continue to be in full force and effect. Any action to interpret or enforce it shall be brought in Kane County, in the State of Illinois. The foregoing understood and agreed, I hereby release and waive any and all claims against Pedal Across Wisconsin, Inc. sponsors, workers, volunteers, organizations, schools, businesses, and any other parties connected with this event in any way ('releases') singularly or collectively, and further hold harmless and indemnify such releases from and against any liability, claims of negligence, misadventure, harm, loss, inconvenience, or damage hereby suffered or sustained as a result of participation in the Pedal Across Wisconsin, Inc. tour, or any other activity associated here within. Such release, waiver, hold harmless and indemnity shall apply to my own claims and/or claims of third parties, relating to my participation in this event. I waive, release, discharge for myself, my heirs, executors, administrators, legal representatives (including successors) any and all rights and/or claims which I have, may have, or may hereafter accrue to me against the sponsors and promoters of Pedal Across Wisconsin, Inc. or other sponsors or affiliated organizations and their respective agents, officers, and employees for any and all damages, injuries or claims which may be sustained by me directly or indirectly arising out of my participations in Pedal Across Wisconsin, Inc.. I agree to abide by the rules of the road and certify that I will read the Pedal Across Wisconsin, Inc. safety letter when sent to me. The undersigned acknowledges having read and agreed to the terms of the foregoing Release and Waiver of Liability agreement, and also acknowledges they have read the [safety letter](#).

**EACH PARTICIPANT MUST SIGN A SEPARATE WAIVER**

**(Please do not amend the waiver)**

**I have acknowledged I have read the SAFETY LETTER.** (Link is on registration website page)

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<b>Signature of Adult Participant</b>	<b>Date</b>	<b>Printed Name</b>	<b>Date</b>
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Or, the following signatures if rider is a minor (under age 18): Parent/guardian must be on ride.

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Signature of Minor	Age*	Date	Printed Name of Minor	Date
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*Signatures of both parents (and guardian)	Date
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