BEGINNER BIKES RIDERS CLUB

BBRC EVENT REGISTRATION

Ride safe. Ride smart. Ride On!



For Office Use Only:	
Event Date: Host Region: Host Chapter:	<u> </u>

Name	Date of Birth	
Address		
City		
Country		
Telephone		
Optional Information: Cel Phone		
E-mail		
BeginnerBikes.com Screen Name		
Emergency Contact(s) List at least one:		
Name		
Contact Number		
Name		
Contact Number		
me, foregoing compensation, for promoting BBR0	anization, Intarily applied to participate ry to my person and property al and man-made hazards whice appen to anyone at anytime. I m my attendance and particip resulting during a club activit as BBRC and beginnerbikes.c RC officer, director, and agen Any individual involved in ar numediate removal from all clu as BBRC, to include, but not li removal on any public Intern consent to BBRC or beginnerbic C or beginnerbikes.com in a re-	, consideration of the acceptance in a BBRC event. I am aware that it involves traveling through remote areas for the ride management cannot anticipate, it voluntarily accept all risk of personal injurtation in this event or ride. It is becomes the responsibility of the om, as organizations, be held liable. I also the traveline to discharge their duties in my illegal activities will be immediately ub rosters and membership roles and mitted to: a) prohibited to participate in any et forum, serving as notice of such likes.com to using any image or likeness of non-commercial context.
Signature		Date
Note: 1) The information gathered on this applicant distributed to Province and Province and the formation gathered on the same and the formation gathered on the same and the formation gathered on this applicant gathered on the same and the formation gathered on this applicant gathered on the same and t	tion will be used only by the l	BBRC, and will not be shared with or
distributed to BeginnerBikes.com or its forum.		

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