

## Registration for the "One Breath" Century - 2010

In order to be prepared for the number of participants it would be helpful to us if you would

Fill out the registration form below, **print, sign, and mail** to:

**Bob and Jan Brubaker 1319 Summerlin Dr. Clearwater, FL 33764**

**Or email: bob@bobbrubaker.com**

Donations and registrations will be accepted the day of the event.

### ONE FORM PER PERSON, PLEASE

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State \_\_\_\_\_  
Zip \_\_\_\_\_  
Cell Phone Number: \_\_\_\_\_  
Emergency contact & number \_\_\_\_\_

---

**Distance you plan on riding: 20/or less 31 50 62 80 100**  
(circle one)

Note – this just gives us an idea for planning purposes.  
You may change on the day.

RELEASE OF ORGANIZERS AND SPONSORS: The undersigned hereby releases Bob and Jan Brubaker, the State of Florida parks and recreation, and all sponsors involved in One Breath From Death Century from any and all causes of action, claims, damages, personal injury, and all the like, and forever waives the right to sue for any alleged negligence on the part of any foregoing in the respect to any event, rides, or the like involving bicycling. The undersigned assumes the risk involved in bicycling, recognizes that bicycling inherently is a hazardous activity, and recognizes that bicycling may involve, among other hazards, strenuous physical activity and interaction with motor vehicles on roadways. As a condition of participation in the One Breath From Death Century, the undersigned executes this Waiver and Release. Further, the undersigned acknowledges the requirement of all participants to wear a helmet for the duration of any ride. In the event that the undersigned executes the Waiver and Release for himself/herself and/or any minor child or children, then such release shall be effective as to each of the minor children listed below in association with the adult signer.

Signature:

Parent/Guardian signature if under age 19: