

Youth Cycling Camp Registration

For Youth Ages 9 - 13

Making Cycling a Safe & Fun Link to Your Community
(limited spaces to the first 15 campers per week)



DATE(S) REGISTERING FOR: <input type="checkbox"/> July 5 - 9 <input type="checkbox"/> August 16 - 20

Name	Date of Birth (Y/M/D)
Address <small>Street City Postal Code</small>	Club: Summerside Cycling Club
Telephone <small>home Cell</small>	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
School Entering in Sept:	Doctor:
Grade Entering in Sept:	Health Number:
E-Mail <small>Very Important – this is how we communicate with you</small>	
Name of Parent(s)	

Are you currently on any kind of medication? YES NO If YES, please specify :

Are you allergic to anything: YES NO If YES, please specify:

Do you have any special dietary requirements? YES NO If YES, please explain here.

Do you have any heart, lung, muscle or joint problems or any current chronic injuries or illnesses?
 YES NO If YES, please list the type and severity:

Parents are encouraged to attend the camp if they wish to. Would a parent be attending the camp as well (no cost)? YES NO

EMERGENCY INFORMATION

In case of medical emergency, as the parent, I understand that every reasonable effort will be made to contact myself. In the event that I cannot be contacted, I hereby give permission to all organization personnel to act in my name and to secure proper medical treatment for my child.

Name of Parent / Guardian (print)

Date

Signature of Parent / Guardian

DATES OF PROGRAM

July 5 - 9 (9 am to 3 pm) Pick up and Drop off at Rotary Friendship Park, Summerside
Aug 16 - 20 (9 am to 3 pm) Pick up and Drop off at Rotary Friendship Park, Summerside

WHAT THE CAMP WILL TEACH THE CAMPERS

1. Bicycle Safety (Novice)
2. Bicycle Maintenance (Junior)
3. Riding Skills (Intermediate)
4. Community Riding & Exploring Our Environment (Premier)

Full Details about our camps can be found at www.summersidecycling.com/youth

COST OF CAMP

Per Week: \$115.00 per Camper
 \$200.00 per 2 Campers (Family Rate)

For Both Camps: \$200 per Camper
 \$380.00 per 2 Campers (Family Rate)

Please make cheques Payable to **"Summerside Cycling Club"**

SPACE IS LIMITED

We will only accept 15 youth per week in our camps so please get your application to us soon if you are interested.

Please Return Completed Registration and Waiver Forms and your Registration Fee to:

Summerside Cycling Club
c/o Ken Trenholm
2 Darby Drive
Summerside, PE C1N 4V5
902-888-3878

ken@summersidecycling.com

www.summersidecycling.com/youth

Waiver Form

1. Release, Waiver, and Assumption of Risk

Please read and sign the Release, Waiver and Assumption of Risk Agreement, and (if applicant is 18 years of age or younger) the Parent Acknowledgment, Release and Agreement to indemnify. The sport of cycling is organized by a group of volunteers in response to the needs and demands of those who wish to participate. These volunteers derive pleasure from overseeing events. However, because cycling has elements of risk, with the possibility of accidents, injury, and loss, the volunteer is vulnerable and has been target of lawsuits from people that they have volunteered to serve. This is not a satisfactory situation; taken to an extreme, all volunteers could withdraw their support and the organized sport would disappear. Volunteers are not expected under law to perform as professionals, but are required not to be negligent. Hence these volunteers and their organization need protection. For this reason Cycling Prince Edward Island (CPEI) members are required to waive their right of suit against the organization (CPEI). What follows is a legal waiver. In order to become a member of Cycling PEI, this waiver must be signed. No membership will be accepted without it. We ask that everyone make an effort to understand the waiver.

Release, Waiver and Assumption of Risk

I, _____, hereby acknowledge and agree that in consideration of being permitted to participate in the Cycling Programs or Activities organized or operated by the Canadian Cycling Association (CCA), Cycling Prince Edward Island (CPEI) and Associated cycling clubs (herein called "the Associations"): 1. I do hereby release the Association, their members, officers, directors, employees, independent contractors, and agents from all liability, and do hereby waive as against the Associations, their members, officers, directors, employees, independent contractors, and agents all resources, proceedings, claims and causes of action of any kind whatsoever, in respect to all personal injuries or property losses which I may suffer arising out of, or in connection with, my preparation for, or participating in the aforesaid Cycling Programs or Activities, notwithstanding that such injuries or losses may have been caused solely or partly by negligence of the Associations or any of their members, their officers, directors, employees, independent contractors, and agencies. 2. I do hereby acknowledge and agree: a) That the sport of cycling exposes participants to many risks and hazards, some of which are inherent in the very nature of the sport itself, others which may result from human error and negligence on the part of persons involved in preparing, organizing, and staging Cycling Programs and Activities. b) That, as a result of aforesaid risks and hazards, I as a participant may suffer serious injury, even death, as well as primary loss. c) That some of the aforesaid risks and hazards are foreseeable, but others are not. d) That I nevertheless freely and voluntarily assume all the aforesaid risks and hazards, and that accordingly, my preparation for, and participation in the aforesaid Cycling Programs and Activities shall be entirely at my own risk. e) That I understand that neither the Association nor any of their members, officers, directors, employees, independent contractors, and agents assume any responsibility whatsoever for my safety during the course of my preparation for or participation in the aforesaid Cycling Programs and Activities. f) That I have carefully read this Release, Waiver and Assumption of Risk agreement, that I fully understand the same, and that I am freely and voluntarily executing the same. g) That I understand clearly that by signing this release, I will be forever prevented from suing or otherwise claiming against the Association or any of their members, officers, directors, employees, independent contractors, and agents for any loss or damage connected with any property loss or personal injury that I may sustain while participating in or preparation for any of the above mentioned Cycling Programs or Activities whether or not such loss or injury is caused solely or partly by negligence of the Associations or any of their members, officers, directors, employees, independent contractors or agents. h) That I have been given the opportunity and have been encouraged to seek independent legal advice prior to signing this agreement. i) That I understand clearly that the Associations would not permit me to participate in any such Cycling Programs and Activities unless I signed this Release Waiver and Assumption of Risk agreement, that this Release Waiver and Assumption of Risk agreement applies to all the aforesaid Cycling Programs and Activities whether occurring in the near or distant future, and that the terms of this Agreement need not be brought to my attention each time I participate in a Cycling Program or Activity in order to be effective. j) I give the Associations / Cycling PEI permission to use any picture of myself taken at cycling activities. Initial here if you do not give permission, _____.

DATE: _____

SIGNATURE: _____

WITNESS: _____

PARENT OR GUARDIAN SIGNATURE: _____

2. Event / Citizen / Race License Declaration

.. I declare that I am unaware of any reason why the requested license should not be issued... I declare that I have not requested a license for the same year from the UCI or any other National Federation.. I assume exclusive responsibility for the present application and the use to be made of the license.. I hereby undertake to respect the Constitution and Regulations of the International Cycling Union, its continental Confederation and its National Federations.. I will participate in cycling competitions or events in a loyal sporting manner. I will submit to disciplinary measures taken against me and will take any appeals and litigation to the authorities provided for in the Regulations. Subject to that reservation, I shall submit any dispute that may arise exclusively to the courts of the place of domicile of the UCI.. I will participate in only sanctioned or recognized events.. Should I participate in a cycling race where a drug test is conducted under the UCI Drug-Test Regulations, I shall agree to submit to those tests.. I agree that the results of the analysis be released to the public and communicated in detail to my club, team or to my coach or doctor.. I undertake to submit any objectives concerning drug abuse to the "Court of Arbitration for Sport" (CAS), whose decision I shall accept as final.

.. I accept that all urine samples taken become the property of the UCI and that the UCI may have them analyzed, notably for the purpose of research and information on health protection.. I agree to my doctor and/or doctor of my club/team communicating to the UCI, on its request, the list of medicines I have taken and treatments I have undergone before any given competition or cycling event.

DATE: _____

SIGNATURE: _____

WITNESS: _____

PARENT OR GUARDIAN SIGNATURE: _____

Camper Profile

Name: _____

1. How long have you been riding? _____
2. What do you like most about riding your bike? _____

3. Who do you go biking with? _____
4. What is your favorites place to bike? _____

5. What does riding a bike mean to you? _____

We will submit this profile, together with a photo, to the local newspaper and on our Summerside Cycling Web Site as we will run a Youth Cyclist of the Week program during the summer.

*Please bring **this form** and **your bike check form** to your first day of camp or email Ken at ken@summersidecycling.com or drop them off at his home at 2 Darby Drive, Summerside*

Bike Check Form

Summerside Youth Cycling Camp Bike Checklist

Camper: _____

Phone Number: _____

This checklist should be taken into your local bike shop. The bike shop should perform a safety check on the bike to ensure it is safe, and in proper working order. This check should minimize time spent on repairs, so more time is spent riding. Leave this form with the bike shop and they will return it to you completed. You then bring the form to the first session.

Pass	Fail	Repaired	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handlebar, stem, seat, seat post, pedals, cranks and important bolts are all tight
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gears shift smoothly, derailleurs, cables and housing in sound working condition, levers tight, limit screws properly adjusted.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Brakes work properly, levers, cables and housing, pads in good working order and condition.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wheels are reasonably true with no broken or loose spokes.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Frame and fork are not bent, cracked, or otherwise seriously misaligned
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bearings in headset, bottom bracket, cones in hubs, are not excessively loose or in need of urgent repair.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tires are not seriously worn, torn, cracked, cut, or in need of replacement.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wheel nuts and/or quick releases are properly installed and
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rear and front reflector/lights

Bike Mechanics Recommendations:

Bike Mechanic's Signature

Date

Shop Name

This Bike check is only a preventative inspection. Neither the bike shop nor the Summerside Cycling Club are responsible for the state of each participant's bicycle. It is the full responsibility of participants to ensure that their bicycle is properly maintained and safe. Please take your bicycle into the bike shop as soon as possible, as you may need to leave it there for a few days. This form **must** be returned and **completed** at the first session.

The following Bike Shops will perform this bike check at no cost (if repairs are required, they will charge their usual fees): **Summerside Bike Works** (436-3842), **Paul's Bike Shop** (882-3750), **MacQueen's** (368-2453), **Smooth Cycle** (566-5530). A special thanks to these bike shops for helping with the program.