

Share The Road

Register Early!

Participation

Limited

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For More Information

Call (516) 697-0185

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Massapequa Park Bicycle Club

Presents

The 20th Annual

**Tour of the
Hamptons**

Sunday, September 25, 2011

Rain or Shine

Southampton High School

25, 50, 70 & 100 Mile Tours

25 Mile Guided Rides Available



Proceeds to benefit

Make-A-Wish Foundation

Maureen's Haven

Scholarship Funds for:

Easthampton High School

Southampton High School

Massapequa High School



Massapequa Park Bicycle Club
P. O. Box 231
Massapequa, NY 11758-0231

The 20th Annual TOUR OF THE HAMPTONS - Sunday, September 25, 2011, RAIN OR SHINE

Register Early! Participation is Limited

The Tour: The Tour of the Hamptons begins in Southampton and travels through mostly flat terrain and rolling hills on the south fork of Long Island, passing farmlands, beaches, mansions and historic towns such as East Hampton, Amagansett and Montauk before returning to Southampton. The tour has routes of 25, 50, 70, 100 miles and two 25 mile Guided Rides. Proceeds from the tour fund a generous contribution to the Make-A-Wish Foundation of Suffolk County, to Maureen's Haven and to the Scholarship Funds of Easthampton High School, Southampton High School, and Massapequa High School.

Registration: Prepaid registration is \$30. Tour-day registration is \$40. Registration may be done online at www.active.com, www.massparkbikeclub.org or by mail. Prepaid registrations completed online, or postmarked by August 26, 2011, will receive a free commemorative T-Shirt. To register by mail, complete, sign, and send this registration form with a \$30.00 check or money order, payable to the **MPBC**, to:

TOH, c/o Ed Major, 76 Miller Blvd, Syosset, NY 11791

Starting Place and Directions: The Tour starts at Southampton High School, Southampton NY. Coming from the north, take the Long Island Expressway (495) east to exit 70 and follow Route 111 south to Route 27 east. Continue on Route 27 east to Hampton Road. Turn right onto Hampton Road and take the first left onto Narrow Lane. Southampton High School is on the right, **141 Narrow Lane Southampton, NY 11968**. Coming from the south, take the Southern State Parkway to exit 44, Route 27 east. Follow the directions from Route 27 east given above.

Suggested Starting Time: 100-m tour, 7:30am. 50- and 70-m tours, 8:00am. 25-m tour, 9:00am. 25-m Guided Rides, 9:00am and 10:30am

Support: SAG wagon, route sheets, road markings and rest stops with refreshments are provided for all routes. We suggest you bring a spare tube, extra cash and a cell phone. SAG support stops at 4:30 pm and the last food stop closes at 5:00 pm. **Raffle:** Day of event raffle, a Trek 2.1 Road Bicycle, Retail Value \$1,370, courtesy of The Bicycle Planet. **NOTE: * * * REGISTRATION OPENS AT 7:00AM * * * THE TOUR CLOSSES AT 5:00PM * * ***

HELMETS ARE REQUIRED FOR ALL RIDERS REGARDLESS OF AGE

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY, AND PARENTAL CONSENT AGREEMENT ("Agreement") for LEAGUE OF AMERICAN WHEELMAN D/B/A LEAGUE OF AMERICAN BICYCLISTS ("LAB") and MASSAPEQUA PARK BICYCLE CLUB (MPBC)

IN CONSIDERATION of being permitted to participate in any way in Massapequa Park Bicycle Club (MPBC) ("Club") sponsored Bicycling Activities ("Activity") I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of Bicycling Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further acknowledge that the Activity will be conducted over public roads and facilities open to the public during the Activity and upon which the hazards of traveling are to be expected. 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.

2. FULLY UNDERSTAND that (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH ("Risks"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the conditions in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I may incur as a result of my participation in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the Club, the LAB, its respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS. And, I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

I AM 18 YEARS OF AGE OR OLDER, HAVE READ AND UNDERSTAND THE TERMS OF THIS AGREEMENT, UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING THIS AGREEMENT, HAVE SIGNED IT VOLUNTARILY 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. I AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PARTICIPANT'S NAME (PRINTED): Last _____ First _____ DATE: _____

PARTICIPANT'S SIGNATURE (only if age 18 or over): I HAVE READ THIS RELEASE _____

ADDRESS: (Street) _____ (City) _____ (State) _____ (Zip) _____

PHONE: _____ EMERGENCY CONTACT NAME AND PHONE: _____

MINOR RELEASE

(complete for Participants Under the Age of 18)

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF BICYCLING ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

MINOR'S NAME (PRINTED): _____ BIRTH DATE OF MINOR: _____

SIGNATURE OF MINOR PARTICIPANT: _____

PARENT/GUARDIAN NAME (PRINTED): Last _____ First _____

PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18): I HAVE READ THIS RELEASE _____

I / we will ride (circle one): 25 miles 50 miles 70 miles 100 miles 25 mile Guided Ride, 9:00am 25 mile Guided Ride, 10:30am

Free T-shirt (if postmarked by August 26, 2011) All shirts are in adult sizes: For me: (circle one) S M L XL XXL For Minor: (circle one) S M L XL XXL

Check here if you would like information about becoming a Massapequa Park Bicycle Club member: _____