

INFORMED CONSENT

I, (print name): _____ attest that all information given on my physical readiness questionnaire (PAR-Q) is true and completed to the best of my ability. I deny possessing any medical condition which would put me at risk while participating in either or both of the following activities organized by or held at Beachwood Bicycles (Beachwood Bicycles, Inc.): Group road/mountain bike rides and/or recreational stationary cycling (“Spin”) classes. I understand that I participate in these classes voluntarily and at my own risk. I will not hold Beachwood Bicycles, Inc., Gregory Trout, Robyn Trout, Lea Yeager and/or Peter Kercheval accountable for any injury, illness, or life-threatening occurrence (i.e.: getting hit by a motor vehicle, running into a tree, heart attack, etc) that may happen to me while participating in these activities. I understand that by signing this waiver once, I am agreeing to these conditions for any and all dates on which I participate in activities organized by Beachwood Bicycles, Inc. This agreement also assumes that I will notify Beachwood Bicycles, Inc. of any change in my medical status, at which time I will fill out another PAR-Q and INFORMED CONSENT.

Participant Signature

Date

Emergency Contact and Relationship

Phone #