

Optional Spaghetti Meals

2025 On-Site Registration

Bib#

TOTAL DUE

Payment Type / Check #

DO NOT MAIL IN -- BRING TO REGISTRATION CHECK-IN

First Name:	Last Name:	Birthdate (mm/dd/	′уууу)	
Mailing Address:				
Email Address:		(this will be used to confirm y	your registration)	
Cell Phone:	If needed, may we text Normal carrier text charges may apply.	t you at this number?	Yes No	
Emergency Contact Name:		Phone:		
Choose Your Route (approx miles):	15-mile 30-mile	63-mile	100-mile	
OPTIONAL POST-RIDE SPAGHETTI LUNCH: Adult Meat Sauce (\$10) Adult Veg. Sauce YOUTH REGISTRATIONS If you are registering minors, by listing the names here All minors must ride the same route as their registered	e (\$10) Child (12 y/o & under) Meat Sa	auce (\$5) Child Veg. S		
Name		Age on 6/28/25	Route	
	On-Site Rates (06/13 - 06/28)	*Please note: Child Ridealongs are free (but children must be in a buggy/trailer/bike seat with helmet &		
15- & 30-Mile Routes	\$40/adults; \$15/youth	must be listed on waivers)		
Metric & Century Routes (63- & 100-Mile)	\$50/adults; \$20/youth			
		Quantity	Costs	
Ride Registrations				

For office use

Tour de Corn

Release & Waiver

I, the undersigned, know and understand that TOUR DE CORN and its related events involve potentially hazardous or dangerous activities and conditions. I attend and/or participate in TOUR DE CORN and all related events out of my own free will and choice. I FULLY ACCEPT AND ASSUME ALL RISKS, whether before, during or after TOUR DE CORN and its related events, whether or not an event is listed herein. These include, without limitation, BUT ARE NOT LIMITED TO THE FOLLOWING: physical/mental injury, distress, trauma, sickness, acts by spectators, participants or third persons, equipment failure or defective equipment, inadequate safety equipment, the effects of weather including extreme temperature or conditions, traffic, contact with motor vehicles, collision with other persons or fixed objects, the conditions of the road and facilities, including campgrounds, all risks along the route, risks of crime, violence, terrorism or acts of terror, the possibility that TOUR DE CORN and any related events may be postponed, ended early, or cancelled altogether, and the negligence of others, including, without limitation, those persons organizing, sponsoring, volunteering or participating in TOUR DE CORN and/or events occurring in connection with it. I acknowledge participation includes possible exposure to and illness from infectious diseases including but not limited to COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; I knowingly and freely assume all such risks related to illness and infectious diseases, such as COVID-19, even if arising from the negligence or fault of the Released Parties; and I hereby knowingly assume the risk of injury, harm and loss associated with the Activity, including any injury, harm and loss caused by the negligence, fault or conduct of any kind on the part of the Released Parties. I am aware bicycling is potentially hazardous and that this risk cannot be eliminated by TOUR DE CORN organizers, sponsors, volunteers or anyone else who hosts or assists in the TOUR DE CORN events. I know and accept that biking, road and other accidents may result from the failure for any reason (including negligence) of TOUR DE CORN organizers, sponsors, volunteers and the government and private entities that plan, host or assist in the TOUR DE CORN events to assess or correctly determine the conditions and safety of the road, surface, route or weather or to predict where or when an accident might occur. All risks are known, appreciated and assumed by me, and I waive any and all specific notice of the existence of them and further waive the obligation, if any, that any other person or entity has to advise or warn me of them. I assume liability for and agree to pay my own medical and emergency expenses in the event of injury, illness, or other incapacity regardless of whether I authorized such expenses. I authorize the use and release of personal and medical information in connection with any medical services provided to me. I represent that I am in sound medical condition capable of participating in the TOUR DE CORN events without risk to myself or others. I represent that I have the degree of skill and knowledge necessary for me to engage in these activities safely. I will be solely responsible for the condition and adequacy of my bicycle, safety gear and equipment. I will ride safely within the limits of my own abilities, my equipment and the riding conditions and in a manner that does not endanger others or me. I understand and acknowledge that this waiver includes children or pets in my party being pulled or riding in a bike seat. Knowing these facts I for myself, spouse, children, heirs, next of kin, executors, assigns and anyone acting on my behalf, RELEASE, WAIVE, DISCHARGE, COVENANT NOT TO SUE AND AGREE TO HOLD TOUR DE CORN sponsors and participating clubs, communities and organizations; TOUR DE CORN officials, emergency and support personnel, volunteers and their representatives; and the officers, directors, employees, representatives, agents, assigns, and successors of all of the above, HARMLESS FROM ANY AND ALL LOSSES, DAMAGES, INJURIES, COSTS, EXPENSES, LIABILITIES, CLAIMS, DEMANDS AND ACTIONS OF ANY AND EVERY KIND, INCLUDING CLAIMS OF NEGLIGENCE, I have, may have or may hereafter accrue against the released parties directly or indirectly arising out of or relating in any respect to my attending or participating in TOUR DE CORN and/or any related events. I acknowledge that I am signing this Agreement freely and voluntarily, and INTEND BY MY SIGNATURE FOR THIS TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW. I will abide by all TOUR DE CORN rules and regulations. I understand that my name, address, photograph, voice and/or likeness may be used in news, promotional or advertising content in all media forms created or distributed in connection with TOUR DE CORN. I consent to such uses and waive any rights of privacy or publicity I may have in connection with those uses. I also waive any privacy rights that may result from disclosure of information about me, including without limitation, in connection with provision of any medical services by TOUR DE CORN sponsors and organizations. If I am a minor, my parent or guardian also is signing on my behalf. We both agree to be bound by the terms of this Agreement, waiver and release. All matters arising out of this Agreement and my participation in TOUR DE CORN and any related events shall be governed by the laws of the State of Missouri, and shall be within the exclusive jurisdiction of the state and/or federal courts located within Mississippi County in the State of Missouri, and the parties hereby consent to such exclusive jurisdiction and waive objections to venue therein. If any term of this Agreement is determined by a court of competent jurisdiction to be invalid, illegal or incapable of being enforced, then all other terms of this Agreement will nevertheless remain in full force and effect, and such term automatically will be amended so that it is valid, legal and enforceable to the maximum extent permitted by applicable law, but as close to the parties' original intent as is permissible. I (the previously-named entrant on the Entry Form) HAVE READ THIS AGREEMENT, WAIVER AND RELEASE OF LIABILITY, UNDERSTAND IT AND VOLUNTARILY AGREE TO ACCEPT ITS TERMS. I UNDERSTAND I AM GIVING UP SUBSTANTIAL RIGHTS. The Event Organizer has the sole discretion to alter, change, or cancel the event.

ADULTS (18 and over on day	of event):		
Signature of Participant:		Date:	
Type/Print Name:		_	

YOUTH (17 and under on day of event) - CONSENT AND RELEASE OF PARENT OR GUARDIAN

Required if participant is less than 18 years of age on date of signing this release, even if he/she will be 18 on the date of the ride. Participants under 18 must have an adult accompanying them on the ride. (Please print clearly to ensure proper registration.)

Youth's Name	Birthdate (mm/dd/yyyy)	Name of supervising adult during Tour de Corn (please print)	Relationship of supervising adult (please print)

Signature of Parent or Guardian: Prin	IIIL Naille:	Date:
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