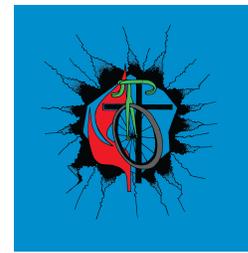


## ***FREE Registration for Last Day of School Bicycle Ride!***



## ***FREE Registration for Last Day of School Bicycle Ride!***



***ALL are invited*** for a FREE bicycle ride on Thursday, May 25th! The excitement will take place beginning at 5:00 PM at the Wesley Campus (701 N. Texas Street). We will offer a 1/2 mile ride for the younger children, and a 5-mile bicycle route for the older children & families. **Helmets are required.** If you do not have a helmet, or a bicycle, please reach out to our Missions Coordinator, Susan Hill, who will have additional equipment provided ([mrshillsusan@yahoo.com](mailto:mrshillsusan@yahoo.com)). We will return to the Wesley Campus and continue to celebrate with free hot dogs, drinks, & music!

***ALL are invited*** for a FREE bicycle ride on Thursday, May 25th! The excitement will take place beginning at 5:00 PM at the Wesley Campus (701 N. Texas Street). We will offer a 1/2 mile ride for the younger children, and a 5-mile bicycle route for the older children & families. **Helmets are required.** If you do not have a helmet, or a bicycle, please reach out to our Missions Coordinator, Susan Hill, who will have additional equipment provided ([mrshillsusan@yahoo.com](mailto:mrshillsusan@yahoo.com)). We will return to the Wesley Campus and continue to celebrate with free hot dogs, drinks, & music!

Please register below, sign the waiver on the back of this form, and return to our Church Office, MCLC Director, or Wesley Director by **Monday, May 22nd.**  
*Can't wait to see everyone...let's get ready for summer!*

Please register below, sign the waiver on the back of this form, and return to our Church Office, MCLC Director, or Wesley Director by **Monday, May 22nd.**  
*Can't wait to see everyone...let's get ready for summer!*

Name(s) of Parent/Guardian & Participants: \_\_\_\_\_

Name(s) of Parent/Guardian & Participants: \_\_\_\_\_

Ages: \_\_\_\_\_

Ages: \_\_\_\_\_

Phone Number & e-mail: \_\_\_\_\_

Phone Number & e-mail: \_\_\_\_\_

*Any and all donations will be put toward mission projects supported by the United Women in Faith that are listed below:*

*Any and all donations will be put toward mission projects supported by the United Women in Faith that are listed below:*

- Agape Community Center
- Beauregard Christian Job Corps
- Dulac Community Center
- God's Food Box
- June Jenkin's Women's Shelter
- Louisiana Methodist Children's Homes
- Pastor's Discretionary Fund
- Wesley Foundation at McNeese
- UMCOR Sager Brown Depot
- United Methodist Cambodia Missions

- Agape Community Center
- Beauregard Christian Job Corps
- Dulac Community Center
- God's Food Box
- June Jenkin's Women's Shelter
- Louisiana Methodist Children's Homes
- Pastor's Discretionary Fund
- Wesley Foundation at McNeese
- UMCOR Sager Brown Depot
- United Methodist Cambodia Missions



**FIRST UNITED METHODIST CHURCH**  
 406 SHIRLEY ST • DERIDDER, LA 70634 • 337.463.4491  
 P.O. BOX 965 DERIDDER, LA 70634  
 WWW.FUMCDERIDDER.ORG • OFFICE@FUMCDERIDDER.ORG  
 Central to DeRidder, Centered in Christ  
 Our Mission is to Grow and Serve in Christ



**FIRST UNITED METHODIST CHURCH**  
 406 SHIRLEY ST • DERIDDER, LA 70634 • 337.463.4491  
 P.O. BOX 965 DERIDDER, LA 70634  
 WWW.FUMCDERIDDER.ORG • OFFICE@FUMCDERIDDER.ORG  
 Central to DeRidder, Centered in Christ  
 Our Mission is to Grow and Serve in Christ

In consideration of you accepting this entry, I, the participant, intending to be legally bound do hereby waive and forever release any and all rights and claims for damages or injuries that I may have against the Event Director, FUMC - DeRidder, and all of their agents assisting with the event, sponsors and their representatives, volunteers and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during or after the event. I recognize, intend and understand that this release is binding on my heirs, executors, administrators, or assignees.

I know that riding a bicycle is a potentially hazardous activity. I should not enter and ride unless I am medically able to do so and properly trained. I assume all risks associated with biking in this event including, but not limited to: falls, contact with other participants, the effects of weather, traffic, and course conditions, and waive any and all claims which I might have based on any of those and other risks typically found in riding a bicycle. I acknowledge all such risks are known and understood by me. I agree to abide by all decisions of any bike official relative to my ability to safely complete the ride. I certify as a material condition to my being permitted to enter this bicycle ride that I am physically fit and sufficiently trained for the completion of this event and that a licensed Medical Doctor has verified my physical condition.

In the event of an illness, injury or medical emergency arising during the event I hereby authorize and give my consent to the Event Director to secure from any accredited hospital, clinic and/ or physician any treatment deemed necessary for my immediate care. I agree that I will be fully responsible for payment of any and all medical services and treatment rendered to me including but not limited to medical transport, medications, treatment and hospitalization.

Further, I grant permission to all the foregoing to use my name, voice and images of myself in any photographs, motion pictures, results, publications or any other print, videographic or electronic recording of this event for legitimate purposes.

This event follows the standard riding industry policy: All entry fees are non-refundable. We reserve the right to postpone or cancel the event due to circumstances beyond our control such as a natural disaster or emergency or as required to protect the safety of participants and staff. We reserve the right to change the details of the event without prior notice.

By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years of age) having read and agreed to the above release and waiver including.

By checking this box, I agree to the waiver and confirm that I am 18 or older and agree to the privacy policy found on runsignup.com.

Signature:

---

In consideration of you accepting this entry, I, the participant, intending to be legally bound do hereby waive and forever release any and all rights and claims for damages or injuries that I may have against the Event Director, FUMC - DeRidder, and all of their agents assisting with the event, sponsors and their representatives, volunteers and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during or after the event. I recognize, intend and understand that this release is binding on my heirs, executors, administrators, or assignees.

I know that riding a bicycle is a potentially hazardous activity. I should not enter and ride unless I am medically able to do so and properly trained. I assume all risks associated with biking in this event including, but not limited to: falls, contact with other participants, the effects of weather, traffic, and course conditions, and waive any and all claims which I might have based on any of those and other risks typically found in riding a bicycle. I acknowledge all such risks are known and understood by me. I agree to abide by all decisions of any bike official relative to my ability to safely complete the ride. I certify as a material condition to my being permitted to enter this bicycle ride that I am physically fit and sufficiently trained for the completion of this event and that a licensed Medical Doctor has verified my physical condition.

In the event of an illness, injury or medical emergency arising during the event I hereby authorize and give my consent to the Event Director to secure from any accredited hospital, clinic and/ or physician any treatment deemed necessary for my immediate care. I agree that I will be fully responsible for payment of any and all medical services and treatment rendered to me including but not limited to medical transport, medications, treatment and hospitalization.

Further, I grant permission to all the foregoing to use my name, voice and images of myself in any photographs, motion pictures, results, publications or any other print, videographic or electronic recording of this event for legitimate purposes.

This event follows the standard riding industry policy: All entry fees are non-refundable. We reserve the right to postpone or cancel the event due to circumstances beyond our control such as a natural disaster or emergency or as required to protect the safety of participants and staff. We reserve the right to change the details of the event without prior notice.

By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years of age) having read and agreed to the above release and waiver including.

By checking this box, I agree to the waiver and confirm that I am 18 or older and agree to the privacy policy found on runsignup.com.

Signature:

---