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## Walter Spohn Trust Worthwhile Mile Ride Release of Liability Agreement & Waiver

I understand that my participation in a Walter Spohn Trust Worthwhile Mile Ride event is a potentially hazardous activity, which may result in serious bodily injury, including permanent disability, paralysis, and death. I fully assume all risks associated with my participation, and discharge the Walter Spohn Trust and its organizers, employees, directors, agents, volunteers, officers, vendors, contractors, subcontractors, and partners from all actions, claims, or demands for damages arising from my participation in a Walter Spohn Trust Worthwhile Mile Ride event. The foregoing release shall be binding upon me personally as well as upon my heirs, executors/administrators, and family members.

I understand that the Walter Spohn Trust reserves the right to deny or cease my participation, for cause, in a Walter Spohn Trust Worthwhile Mile Ride event at any time before or during the tour. In exercising its reasonable discretion to refuse or cease participation, the Walter Spohn Trust may consider the following grounds: inaccurate or incomplete applications, failure to meet the fundraising requirements or deadlines; physical or medical inability to participate; violation of any Walter Spohn Trust Worthwhile Mile Ride policy; or unsatisfactory behavior that is dangerous to or detrimental to myself or other participants. I further understand that in the case of my withdrawal or dismissal from a ride event, my fundraising balance will be considered a donation to the Walter Spohn Trust (EIN: 82-3997332) and will not be refunded.

I understand that the Walter Spohn Trust reserves the right to restrict my participation if deemed to be unsafe or medically inappropriate. I agree that I will not participate in a Walter Spohn Trust Worthwhile Mile Ride event unless I am medically able to do so and unless I am properly trained. I understand that I am required to disclose any health conditions that may potentially hinder my ability to healthy participate in a Walter Spohn Trust Worthwhile Mile Ride event, and that I **MUST HAVE AND PROVIDE PROOF OF ACTIVE HEALTH INSURANCE COVERAGE FOR THE DURATION OF THE TRIP**. I further agree to undergo any prescribed first-aid or medical treatment in the event of accident or illness during a Walter Spohn Trust Worthwhile Mile Ride. If I do not adhere to such prescribed first-aid or medical treatment during the Walter Spohn Trust Worthwhile Mile Ride event, I understand that the Walter Spohn Trust may not permit me from participating in the remainder of the ride. It is my responsibility to inform the Walter Spohn Trust of any changes in my medical condition before the ride begins. Failure to meet any of the above conditions may result in my dismissal from a Walter Spohn Trust Worthwhile Mile Ride event.

I agree to wear a helmet at all times while cycling before and during a Walter Spohn Trust Worthwhile Mile Ride event. I understand that Walter Spohn Trust Worthwhile Mile Ride trip leaders and/or contracted trip guides will evaluate my competence with respect to cycling, traffic laws and rights of the cyclist, hand signaling and effective communication with other drivers, cyclists, and pedestrians sharing the road. I understand that the Walter Spohn Trust reserves the right to dismiss me from participation in a Walter Spohn Trust Worthwhile Mile Ride event if, at any point before or during the ride, Walter Spohn Trust Worthwhile Mile Ride trip leaders and/or contracted trip guides conclude I do not exhibit the above stated competencies.

Upon completing Walter Spohn Trust Worthwhile Mile Ride registration requirements, trip leaders will provide me with the rules and policies of the event. I agree to abide by the rules and policies, and understand that if I do not understand any of the rules or policies it is my responsibility to inform the Walter Spohn Trust and to request clarification of these rules and policies. I understand that my failure to abide by Walter Spohn Trust Worthwhile Mile Ride rules and policies may result in my dismissal from the ride event.

I have read this agreement, fully understand its terms, understand that I have given up substantial rights by agreeing to it and have agreed to it freely 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 and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

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Signature

Name

Date

The Walter Spohn Trust (WST) is a 501(c)3 not-for-profit organization that provides financial support for educational and research projects that aim to advance the field of Anaplastology.