



Destination: Rider Registration Form

Personal Information

Name _____

Address _____

City _____

State _____

Zip Code _____

Email _____

Home Phone _____

Work Phone _____

Cell Phone _____

Passport Number _____

Emergency contact name &
Phone number _____

Relevant Medical Info _____

Dietary Restrctions _____

How many days a week do you typically ride during the cycling season?

1-2 _____ 3-4 _____ 5+ _____

On a typical ride, how long or far do you tend to go? _____ miles or _____ hours

What type of riding do you typically do? (Select all that apply)

Casual/fun rides _____ Weekend Warrior _____ Club Rides _____ Hammer-fests _____ Racing _____

Have you ever completed a century ride? Yes _____ No _____

Bike Jersey Size XS _____ S _____ M _____ L _____ XL _____ XXL _____ XXXL _____

Fundraising, Trip Costs, and Registration Fees

Each rider is required to raise a minimum \$4,000 for the Central New England Chapter of the National MS Society. All fundraising contributions will be paid directly to the Chapter. The Chapter will receive a minimum of 80% of all funds raised with the remaining 20% helping to cover trip costs. The money raised will support the National MS Society's Promise 2010 campaign.

The cost of the trip is \$2,700. Trip costs will be covered by a combination of registration fees paid by the rider to Destination Cycling and reimbursement from the Central New England Chapter. Each rider must pay a minimum \$1,000 registration fee. The remaining \$1,700 will be paid by the rider and the Central New England Chapter, with the relative amounts determined by the total funds raised by the rider as outlined in the table below. Spouses or significant others can attend for the full trip price of \$2,700.

Fundraising and Registration Fees

Funds Raised	Total Registration Fee	Due at Registration	Due May 1st	Due Aug. 1st
\$10,000	\$1,000	\$500	\$500	-\$500*
\$9,500	\$1,000	\$500	\$500	-\$400*
\$9,000	\$1,000	\$500	\$500	-\$300*
\$8,500	\$1,000	\$500	\$500	-\$200*
\$8,000	\$1,000	\$500	\$500	-\$100*
\$7,500	\$1,000	\$500	\$500	\$0
\$7,000	\$1,100	\$500	\$500	\$100
\$6,500	\$1,200	\$500	\$500	\$200
\$6,000	\$1,300	\$500	\$500	\$300
\$5,500	\$1,400	\$500	\$500	\$400
\$5,000	\$1,500	\$500	\$500	\$500
\$4,500	\$1,600	\$500	\$500	\$600
\$4,000	\$1,700	\$500	\$500	\$700

*A participant who raises over \$7,500 will be reimbursed this amount after all funds have been submitted to the MS Society.

Fundraising Agreement

In consideration of the acceptance of my registration in the Destination: Charity I agree to collect the fundraising minimum of **\$4,000** for the benefit of the National Multiple Sclerosis Society and to be personally responsible to the National MS Society for the difference if I fail to collect the required funds. **The deadline for receipt of the minimum amount is August 1st, 2008. I understand that the outstanding balance towards the minimum fundraising requirement will be charged to my credit card if I have not met this requirement by the deadline.**

Credit Card Information

Credit Card Type _____

Credit Card Number _____

Expiration Date _____

3 Digit Code on Back _____

Name as it Appears on Card _____

Registration Fees and Cancellation Policy

I acknowledge that by registering for the Destination: Charity, I am agreeing to pay Destination Cycling a **non-refundable** registration fee of **\$500** when I register. I agree to pay Destination Cycling an additional **\$500 on May 1, 2008**. The balance of the registration fee will be determined by the amount I fundraise as outlined in the attached table. I agree to pay the balance of my registration fee by **August 1st, 2008**. If I cancel **before June 1st, 2008**, I will receive a refund of all but \$500 of the registration fee. If I cancel **after July 1st, 2008**, I will receive a refund of all but \$1,000 of the registration fee. If I cancel, I agree to give all funds I have raised to the National MS Society.

Please pay your registration fee by check.

I HAVE READ THIS FUNDRAISING AGREEMENT AND CANCELLATION POLICY, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Print Name _____

Signature _____

Date _____

Please pay your registration by check, made payable to Destination Cycling. Mail to P.O. Box 203, Marblehead, MA 01945

Amount Included: _____

Release, Waiver of Liability and Registration Form

Name: _____

Spouse/ Significant Other: _____

I, the above named participant, am eighteen years of age or older and have voluntarily applied to participate in the above identified activity ("Activity").

I am aware that travel, whether by plane, train, auto, boat, automobile, bus, bicycle or on foot contains some inherent risk of illness, injury or death all of which may be caused by negligence of myself or others, physical exertion for which I am not prepared, consumption of alcoholic beverages, forces of nature or other know or unknown agencies. I am aware that medical services and/or medical facilities may not be readily available during some of the time in which I am participating in the Activity. I acknowledge that there may be additional hazards and risks associated with any travel that is involved with the Activity. I recognize that such risks may be present before, during and after my participation in the Activity under the arrangements made by Destination Cycling Inc., and it's affiliated companies, and their employees, guides, officers, directors and agents (collectively referred to as "Destination Cycling") and The New England Multiple Sclerosis Society.

In consideration of, and in part payment for, the right to participate in the Activity, I have and do hereby fully assume all risks of illness, injury or death and hereby release and discharge Destination Cycling and The New England Multiple Sclerosis Society from all actions, claims or demands for damages resulting from my participation in the Activity. I further agree to indemnify and hold harmless Destination Cycling and The New England Multiple Sclerosis Society from liability for the injury or death of any person(s) and damage to property that may result from my negligent or intentional acts or omission while participating in the Activity. I agree that the foregoing obligations shall be binding upon me personally, as well as upon my heirs, executors and administrators.

I certify that I have adequate insurance to cover my needs and the needs of my family and /or dependents as a result of any injury or damage I may cause to suffer while participating in the Activity including, but not limited to trip cancellation insurance, hospital and medical insurance, and personal and liability insurance. I further certify that I have no medical or physical conditions, which could interfere with my safety in this activity. I understand that and agree that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity. I understand that I follow the suggested itinerary at my own risk and agree not to hold Destination Cycling and The New England Multiple Sclerosis Society responsible for injury or death resulting from this trip. I agree to wear a bicycle helmet while cycling at all times during the Activity. I agree not to have illegal drugs on my person or in my possession, or to violate any other law, during any part of the Activity.

I understand that Destination Cycling and The New England Multiple Sclerosis Society reserves the right to take photographic, video or film records on any of their trips, and I hereby agree Destination Cycling and The New England Multiple Sclerosis Society may use such records for promotional and/or commercial purposes without any remuneration to me.

Destination Cycling and The New England Multiple Sclerosis Society is not liable for expenses, e.g., meals, transportation or hotel costs not specified as included in the trip cost but that may be required to get to or from a trip start or end.

Destination Cycling and The New England Multiple Sclerosis Society is not responsible for additional expenses due to delays or changes in transport or hotel services, sickness, weather, strikes, war, quarantine, government regulations, or any other cause.

Destination Cycling and The New England Multiple Sclerosis Society reserves the right to make route and hotel modifications or to withdraw any tour announced without notice and to make alterations and substitutions in the itinerary as necessary to improve the trip quality or to accommodate the comfort, convenience and well-being of the travelers. I understand that Destination Cycling and The New England Multiple Sclerosis Society has the right to deny participation to any person deemed unsuitable or unfit to participate in the Activity.

This agreement will be interpreted according to the laws of the Commonwealth of Massachusetts. Jurisdiction over any dispute arising out of this agreement shall be exclusively in the courts of the Commonwealth of Massachusetts. If any portion of this agreement is determined by a court to be null and void, the remaining portions of the agreement shall valid and binding upon all parties.

I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms. I acknowledge and that I have carefully read Destination Cycling's general information and Terms & Conditions as posted on website (at <http://www.destinationcycling.com>) including, but not limited to, its cancellation and refund policy and I agree to all stated conditions set forth therein.

Executed as an instrument under seal as of the date set forth in the signature below.

Participant #1

Print Name _____

Sign _____

Date _____

Participant #2

Print Name _____

Sign _____

Date _____

DESTINATION CYCLING



Terms and Conditions

Responsibilities of the traveler

Travelers are responsible for selecting a tour suitable for their athletic ability, fitness level and state of health. They are responsible for reading all pre-trip materials, reading and obeying all safe biking rules, local traffic rules and advising Destination Cycling of any medical or dietary problems or restrictions. Travelers must wear helmets while biking on any trip. Travelers are responsible for informing themselves on all passport, visa and health requirements relative to their trip and to be sure that all documents required for their trip are in proper order and taken with them on the trip. Travelers are responsible for checking in for flights at the correct time and for presenting themselves to take up all pre-booked components of the trip. Travelers must sign a Destination Cycling Release and Assumption of All Risk Form and Personal Information Form after reserving a trip and before departure on any Destination Cycling Trip. Travelers will not be permitted to join a trip without these signed forms on file. Travelers must arrive at the designated trip departure point with the appropriate clothing and gear recommended for their trip. Travelers are required to respect the laws and customs of countries visited and follow environmental guidelines and regulations while on the trip in accordance with the direction of the trip's leader. Travelers must at all times respect the rights and privacy of other travelers. Destination Cycling reserves the right to ask an individual to leave the trip if, in the opinion of the leader, the traveler's continued participation may prove detrimental to the individual or is not compatible with the well-being and enjoyment of the other travelers.

Limitations of Liability and Release

Destination Cycling is not liable for bodily injury or property damage as a result of, but not limited to: physical exertion for which a traveler is not prepared; forces of nature, civil unrest, terrorism, illegal activity or force majeure; travel by plane, train, auto, boat, bicycle or other conveyance, or by foot or other form of active or adventure travel; consumption of alcoholic beverages; breakdown of equipment; high altitude; inclement weather; lack of or limited access to medical attention in remote locations; and inadequacy of medical attention once provided.

Destination Cycling is not liable for expenses, e.g., meals, transportation or hotel costs not specified as included in the trip cost but that may be required to get to or from a trip start or end. Destination Cycling is not responsible for additional expenses due to delays or changes in transport or hotel services, sickness, weather, strikes, war, quarantine, government regulations, or any other cause.

Destination Cycling reserves the right to make route and hotel modifications or to withdraw any tour announced without notice and to make alterations and substitutions in the itinerary as necessary to improve the trip quality or to accommodate the comfort, convenience and well-being of the travelers. In this event, Destination Cycling will always substitute an equal or better option.

Before starting any of our trips, you will need to sign our release form. You will be sent a release form once you have sent in your reservation form or you may request one with joe@destinationcycling.com.

Insurance

Destination Cycling strongly suggests that you carry both personal and travel insurance. Travel insurance is well worth the money it costs, here are a few reasons why:

In the event you need to cancel your trip, you can recoup the cancellation penalties, travel interruptions, delays, emergency medical expenses, lost baggage, emergency medical assistance, last-minute or emergency travel changes and more.

Travel insurance also helps protect yourself and your belongings if you can't travel or if your vacation is interrupted for any reason.

Here are a few links to some of the major companies where you can purchase it:

www.travelex.com, www.insuremytrip.com, ww.travelguard.com, www.cfig.com/travel