Registration Form

AMAZING BIKE COLORADO

August 8 – 14, 2027

RIDER INFORMATION

FULL NAME

PREFERRED NAME

EMAIL ADDRESS

PHONE NUMBER

DATE OF BIRTH MM / DD / YYYY

GENDER ☐ Male ☐ Female

STREET ADDRESS

CITY

STATE

ZIP CODE

EMERGENCY CONTACT

** Must be a point of contact who is NOT a fellow rider.*

FULL NAME

PHONE NUMBER

RELATION TO EMERGENCY CONTACT

MEAL PREFERENCE & MEDICAL CONDITIONS

DO YOU HAVE A MEAL PREFERENCE?

☐ No dietary restrictions ☐ Vegetarian ☐ Pescatarian

DO YOU HAVE ANY MEDICAL CONDITIONS THAT THE TOUR SHOULD BE AWARE OF ?

☐ Yes ☐ No

If yes, please list condition(s) and medication(s):

BICYCLE & SWAG

WHAT IS THE BIKE TYPE YOU PLAN TO RIDE?

☐ Road ☐ Hybrid ☐ Upright ☐ Recumbent

☐ Trike ☐ Tandem ☐ E-Bike (removable battery) ☐ E-Bike (internal battery)

☐ Other:

WILL YOU BE RENTING A BICYCLE FROM THE BPP RECOMMENDED OUTFITTER ?

☐ Yes ☐ No ☐ TBD

T-SHIRT SIZE (UNISEX)

☐ S ☐ M ☐ L ☐ XL ☐ 2XL ☐ 3XL ☐ 4XL

VOLUNTEER APPRECIATION NOTE:

Our dedicated volunteer staff are committed to ensuring an enjoyable experience for all participants. Volunteer appreciation envelopes will be distributed at the event, cash is the preferred means; and alternative payment mechanisms (checks, Venmo, Zelle) are mutually appreciated. Tips collected will be evenly distributed amongst the volunteers only, ownership is not included.

PRICING & REGISTRATION CLASS

REGISTRATION CLASS	EARLY BIRD PRICE (thru 6/1/2027)	STANDARD
Single	**$3,150**	**$3,350**
Double	**$2,550**	**$2,750**

For Triple & Quad rates please reach email us at pamperedpedalers@gmail.com

REGISTRATION CLASS

☐ **Single** ☐ **Double**

BED CONFIGURATION

☐ **1 Bed**
☐ **2 Beds**
☐ **No preference**

ROOMMATE / PARTNER FULL NAME

ROOMMATE / PARTNER EMAIL

NON-TRADITIONAL BICYCLE CHARGES

Updated Non-Traditional Bicycle Policy Overview

Beginning in spring 2027, riders bringing non-traditional bikes on BPP rides will be required to pay a service charge. This fee helps offset the additional planning, handling, and logistical support required for bikes that are larger, heavier, or need special accommodations. We appreciate riders' understanding as we work to ensure that all bikes can be supported safely and efficiently.

BIKE TYPE	WEIGHT CRITERIA	SERVICE CHARGE	BOOKING CODE
E-bike	Less than 50 lbs	**No charge**	
E-bike (Class 1, 2 or 3)	51-100 lbs	**$100**	☐ **E1**
E-bike (Class 1, 2 or 3)	101 lbs or more	**$125**	☐ **E2**
Trike	Less than 75 lbs	**$100**	☐ **T1**
Trike	76 lbs or more	**$125**	☐ **T2**

If applicable, check the box for your bicycle's Booking Code, include the applicable fee with your check, and reference the code on your payment.

PAYMENT & PROCESSING

Pay in full by personal or cashier's check and **save $50** per rider.

Mail completed registration forms to:

Bubba's Pampered Pedalers
1916 Pike Place
Suite 12 #1470
Seattle, WA 98101

Or email a completed scanned copy to:

pamperedpedalers@gmail.com

DISCOUNT CODE

Enter discount code above. One code per registration.

If applicable, deduct your discount code amount & the $50 pay-in-full discount from your payment, and make sure to write the discount code on your check.

Early bird discounts are honored based on the postmark date of your payment.

If you're riding a non-traditional bike, check the Weight Criterion Table and make sure to include the fee with your check, and reference your bike's Booking Code.

CANCELLATION & REFUND POLICY

All cancellation requests must be submitted in writing via email to pamperedpedalers@gmail.com
The effective cancellation date is the date BPP receives the email. Approved refunds will be issued to the original payment method or by mailed check within 10 days of the confirmed cancellation.

CANCELLATION AND REFUND SCHEDULE	
DAYS BEFORE FIRST TOUR DAY	**CANCELLATION FEE PER RIDER**
150 or more days	**$500**
91-149 days	**$600**
61-90 days	**$750**
60 or fewer days	**Non-refundable**

Force Majeure: If BPP is forced to cancel the tour before it begins due to circumstances beyond its control (including natural disaster, governmental action, or public health emergency), registered riders will receive a 100% refund. If the tour begins and is subsequently cut short due to force majeure, no refund will be issued for the unused portion.
Late Arrival / Early Departure: No refund or prorated discount will be issued for late arrival to the tour start or early departure from the tour for any reason.

NAME (PRINT) _____ DATE MM / DD / YYYY _____ INITIALS _____

TRIP INSURANCE

BPP strongly recommends that all participants purchase trip cancellation and interruption insurance before the balance due date. A convenient comparison marketplace is available at www.squaremouth.com/23242. Frequent travelers may find that an annual travel insurance policy offers better value than per-trip coverage — ask your insurance provider for options.

By initialing, I confirm that I have read and understood the trip insurance recommendation above. INITIALS _____

SAFETY COMMITMENT VOW

The BPP Safety First Policy requests your commitment to our best practices:

- ■ To equip my bicycle with both front and rear lights.
- ■ Bicycle lights are to remain illuminated at all times while cycling.
- ■ To obey all traffic signs and signals.
- ■ I vow to protect my awareness on roads where motor vehicles have priority by avoiding in-ear and over-ear headphones and using only bone-conduction headphones when audio is necessary.
- ■ To identify and communicate road or trail hazards, such as "gravel," "hole," or "glass," to surrounding riders.
- ■ Announce my actions to other riders by saying "Slowing," "Stopping," or "Turning."
- ■ Maintain a single-file formation when riding on public roads if a motor vehicle is approaching from any direction.
- ■ Always ride as far to the right as safely possible, unless briefed otherwise.

*I understand and agree that my participation in this tour requires my compliance with the above stated points in this **SAFETY COMMITMENT VOW.*** INITIALS _____

ACKNOWLEDGEMENT

I confirm that I have read and understood the Cancellation & Refund Policy, Trip Insurance Recommendation, and the Safety Commitment Vow set forth on this page, and I agree to be bound by all terms stated therein.

SIGNATURE _____ DATE MM / DD / YYYY _____ INITIALS _____

GENERAL RELEASE, ASSUMPTION OF RISK & INDEMNIFICATION AGREEMENT

This General Release, Assumption of Risk and Indemnification Agreement has legal consequences.

Assumption of Risk:
I, the undersigned, know that this Bubba's Pampered Pedalers bicycle tour, hereafter referred to as the "Event," is a potentially hazardous event, and attend it out of my own free will and choice. In choosing to attend the Event and any related events or activities, I fully accept and assume all risks, whether before, during or after this Event and/or related events or activities. These include, without limitation, risk of physical injury, trauma or death, mental or emotional stress or injury, collision with motor vehicles of all types and descriptions, collision with other riders or fixed or moving objects, contact with other participants, communicable diseases, equipment failure, inadequate safety equipment, effects of weather including extreme temperature or conditions, traffic, the conditions of the roads, theft, camping, participating in events or activities along the route and rides in a bus or other automotive vehicle provided or arranged for the undersigned. All such risks or risks of an event of this type are known or anticipated and are understood and appreciated by me. I waive any and all need for being given notice of the existence of any specific risks. I agree that leaders and maps are provided for my convenience only and do not guarantee a safe route or trip.

My Responsibilities:
I shall assume and pay my medical and emergency expenses in the event of injury, illness or other incapacity regardless of whether I authorized such expense. I realize this Event requires physical conditioning and I represent that I am in sound medical condition capable of participating in the ride without risk to myself or others. I have no medical impediment that would endanger myself or others. I understand that situations may arise during this Event that may be beyond the control of sponsors, promoters and organizers. I will be solely responsible for the condition and adequacy of my bicycle, safety gear and riding equipment. I will ride safely within the limits of my own abilities, my equipment and the riding conditions and in a manner so as not to endanger myself or others.

Release, Waiver, Discharge & Covenant Not to Sue:
Knowing these facts and in consideration of my entry, acceptance, admission to and participation in this Event and its related events and activities, I, for myself and anyone acting on my behalf, waive, release, discharge and covenant not to sue Pedal Productions, LLC, a Missouri limited liability company ("PPL"), its affiliates and respective managers, members, officers, directors, employees, volunteers, agents, representatives, sponsors, volunteers, insurers and insurance brokers, and the respective heirs, executors, administrators, personal representatives, successors and assigns of all of the foregoing (collectively, the "Released Parties") from and for any and all claims, demands, actions, causes of action, damages, liabilities, attorneys' fees, costs, expenses and lawsuits, as well as any claims for any injunctions or other equitable relief, of any and every kind or nature that the undersigned has, may have or which may hereafter accrue to the undersigned against the Released Parties, directly or indirectly, arising out of or relating in any respect to the attendance of or participation by the undersigned in the Event and its related events and activities, including, without limitation, those based on or related to any negligence of any of the Released Parties, or any actions or failures to act by any of any of the Released Parties ("Claims").

Additional Terms:

- I further agree to indemnify and hold the Released Parties harmless from any and all Claims
- I agree to abide by all the rules, regulations or instructions provided by staff or personnel conducting this Event for the safety or general welfare of the participants in the Event.
- I waive my rights of privacy or publicity and grant permission to all of the forgoing to use any photographs, motion pictures, videotapes, recordings or other record of this Event for any marketing or other legitimate purposes.
- If I am a minor, my parent or guardian is also signing on my behalf and we both agree to be bound by the same terms of this General Release, Assumption of Risk and Indemnification Agreement.
- If I am the parent or legal guardian of a minor child participant, I certify that the minor is in good health, qualified and in proper physical condition to participate in this Event and I hereby, for and on behalf of such minor child, waive, release, discharge, covenant not to sue, and agree to indemnify and hold harmless all of the Released Parties from any and all Claims. I will, in my own right, indemnify and hold harmless each of the Released Parties from any and all Claims in connection with the minor's participation in this Event and its related events and activities.

In the event any one or more provisions of this General Release, Assumption of Risk and Indemnification Agreement may be deemed invalid or unenforceable by any court of competent jurisdiction, but if such provision(s) were modified or severed from this document and this document would then be deemed valid and enforceable, it is agreed that such provision(s) shall be deemed so modified or severed, to the extent permitted by applicable law, to give the fullest effect to the intent of this document.

THE UNDERSIGNED HAS READ THE FOREGOING DOCUMENT AND UNDERSTANDS ALL ITS TERMS. THE UNDERSIGNED UNDERSTANDS HE\SHE HAS THE RIGHT TO CONSULT LEGAL COUNSEL PRIOR TO SIGNING AND HAS DONE SO OR HAS EXPRESSLY WAIVED HIS RIGHT TO DO SO. THE UNDERSIGNED SIGNS FREELY, VOLUNTARILY AND WITHOUT INFLUENCE FROM ANY OTHER PARTY.

ACKNOWLEDGEMENT

NAME	DATE MM / DD / YYYY	SIGNATURE