

Bike Livingston

2018

The Livingston Bike Committee is pleased to announce the Sixth Annual Bike Livingston, a family-oriented bike tour through some of our town's beautiful neighborhoods.

Cyclists of all abilities are invited to ride on one of three routes: a 4 mile loop through Collins/Mt Pleasant School area for younger or leisurely riders, an approximately 7 mile loop that also includes the area around Hillside Elementary School or a 11 mile route* that includes hills for those who want more of a challenge.

** recommended for ages 11 and up*

Sunday, June 3, 2018

- 8:30am** Registration and Packet Pick-up on the grounds between Livingston Town Hall and the Y. Bike helmet safety check available.
- 9:00am** Opening Remarks and Safety Talk – mandatory for all riders.
- 9:15am** Bike Tour Begins
- 10:30am** Closing Ceremony at the Pergolas between the Y and Town Hall –featuring Post-Ride Refreshments and Bike Show by Chris Clarke!

Presenting Sponsors:

Saint Barnabas Medical Center | **RWJBarnabas HEALTH**

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Visit us on the web: bikeLivingston.org

facebook.com/bikeLivingston

2018 BIKE LIVINGSTON REGISTRATION FORM

Pre-registration is strongly suggested. Through the generosity of our sponsors and partners, registration is free. First 250 participants to pre-register will receive a free t-shirt on ride day. *Ride takes place rain or shine.*

PARTICIPANT INFORMATION

First Name: _____ Last Name: _____

Address _____ City/State/Zip: _____

Phone: _____ E-mail _____

Age _____ DOB _____ Sex M F ADULT SHIRT SIZE S, M, L, XL / YOUTH SHIRT SIZE S, M, L

Route Distance (please check): 4 miles 7 miles 11 miles (* involves hills, riders must be experienced)

I want to be a Bike Group Leader or Assistant Group Leader. Contact me with more information!

Additional Family Members (children under the age of 12 must be accompanied by an adult):

1. First Name: _____ Last Name: _____

Age _____ DOB _____ Sex M F ADULT SHIRT SIZE S, M, L, XL / YOUTH SHIRT SIZE S, M, L

2. First Name: _____ Last Name: _____

Age _____ DOB _____ Sex M F ADULT SHIRT SIZE S, M, L, XL / YOUTH SHIRT SIZE S, M, L

3. First Name: _____ Last Name: _____

Age _____ DOB _____ Sex M F ADULT SHIRT SIZE S, M, L, XL / YOUTH SHIRT SIZE S, M, L

4. First Name: _____ Last Name: _____

Age _____ DOB _____ Sex M F ADULT SHIRT SIZE S, M, L, XL / YOUTH SHIRT SIZE S, M, L

By completing this registration, I agree to the following terms and conditions (or, if any of the participants is under age 14, the parent or caregiver agrees to enforce these conditions for the young rider(s)):

- Helmets are mandatory for all adults and children in order to participate in the ride.
- Children under the age of 12 must be accompanied by an adult on the ride.
- Riders must follow ride leaders and directions of ride leaders, crossing guards or auxiliary police at all times.
- Riders must follow the basic rules of bike safety:
 1. Ride single file on the right, far enough from the curb to avoid hazards.
 2. Ride a straight line, stay left of parked cars to avoid an opening door.
 3. Be courteous to drivers – set a positive example and be a biking ambassador!
 4. Use hand signals to warn motorists and other riders:
 - RIGHT = left arm out and bent up
 - LEFT = left arm straight outstanding
 - SLOW/STOP = left arm bent down, palm facing back

In consideration for the acceptance of my entry, I, on behalf of myself, my heirs, executors, administrators, and assignees, hereby release myself, discharge the Township of Livingston, and the Metropolitan YMCA of the Oranges, associated sponsors, their staff, officials, volunteers, and all other sponsors or beneficiaries and their representatives, successors and assigns, for all claims for damages and causes of action arising out of my participation in the Bike Livingston and other special events. I attest that I am physically fit and I am able to participate in any of these events. I hereby grant permission to Bike Livingston and any other sponsors of this event to use all information submitted in this application, and any record of this ride containing my likeness, as well as ride results, including my name, for any purpose whatsoever, including, but not limited to pre-ride publicity. I hereby certify that I have read all the terms and conditions of this Release and intend to be legally bound thereby.

SIGNATURE: (Parent or Guardian if under 18 years of age) _____

Each rider must be registered to participate.

West Essex YMCA, 321 S. Livingston Ave, Livingston NJ 07039/ Fax 973-992-7680