

**Dassel Red Rooster Days Bike Ride Registration Form**

Name \_\_\_\_\_ Male \_\_\_\_ Female \_\_\_\_

Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Emergency Contact and #: \_\_\_\_\_

Circle ride participating in:

**17 Mile Bike Ride    7 Mile Bike Ride**

**Please read and sign:** I enter this ride totally at my own risk and hereby waive all claims that I or my heirs have against all sponsors, ride directors, and all associated with this ride for any injuries or problems I may sustain, regardless of negligence. I am totally responsible for my safety and any injury I may suffer.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature (if under 18) \_\_\_\_\_ Date \_\_\_\_\_

Circle T-shirt size:

**Adult XXL Adult XL Adult L            Adult M    Adult S**

**Youth L Youth M Youth S**

Please mail \$5 entry fee to:

**Red Rooster Ride  
70057 250<sup>th</sup> St.  
Dassel, MN 55325**

Make check payable to: Red Rooster Days

For more information if needed, please email: [ammikay@outlook.com](mailto:ammikay@outlook.com)

