

Sample Release Form

[Name of Event] RELEASE FORM

Entrant's First Name

Entrant's Last Name

Street Address and Apt. No.

City

State

ZIP Code

NOTICE: THIS RELEASE FORM IS A CONTRACT WITH LEGAL CONSEQUENCES. READ CAREFULLY BEFORE SIGNING. I ACKNOWLEDGE THAT BY SIGNING THIS DOCUMENT I AM RELEASING [SCHOOL NAME], EMPLOYEES, MEMBERS, SPONSORS, PROMOTER AND AFFILIATES (COLLECTIVELY "RELEASEES") FROM LIABILITY.

I, the undersigned, on behalf of the above-named minor, a prospective entrant in this event, hereby represent that I am fully entitled and authorized, as parent or legal guardian of entrant, to sign this Release Form for this event. As a condition of the acceptance of my application for entry in the above event, and as an express term of this agreement, I AGREE TO INDEMNIFY AND HOLD HARMLESS Releasees from any and all losses, claims, actions, causes of actions, or proceedings of any kind which may be initiated by the entrant or by any other person or organization on the entrant's behalf, including but not limited to demands for damages, judgments, costs, loss of services, or expenses arising from the activities contemplated by this agreement, including but not limited to reasonable attorney fees incurred by Releasees and **INCLUDING THE RISK OF ANY NEGLIGENCE OF RELEASEES**. I further state, to my knowledge, that the entrant has no physical or mental condition which would endanger entrant or others or interfere with entrant's ability to participate in this event.

In signing this Agreement as parent or legal guardian of entrant, on behalf of entrant and myself I voluntarily agree to the following:

1. I assume all risk associated with participation in this event, including but not limited to: the danger of collision with pedestrians, vehicles including but not limited to bicycles, other racers, and fixed or moving objects; dangers arising from surface hazards, equipment failures, and inadequate safety equipment; and conditions stemming from weather effects and the possibility of serious physical and/or mental trauma or injury.
2. I understand and accept that situations may arise during the event which may be beyond the control of the organizers, and that the entrant is required to continually ride in a manner that will not endanger him/herself or others. I am responsible for the condition and adequacy of the entrant's competition and safety equipment, including his or her helmet, which must meet or exceed the CPSA standards.
3. I authorize and consent to the entrant's likeness being used in advertising or promotional materials.
4. I RELEASE AND INDEMNIFY, for entrant, myself, and all heirs, executors, administrators, representatives, assigns and successors, any and all rights and/or claims against the sponsors of this event, the promoter and/or any promoting organization(s), property owners, law enforcement agencies, public entities, special districts and their respective agents, officials, employees or representatives, for any damages which may be sustained by entrant and/or myself, directly or indirectly, arising out of entrant's participation in or association with the event, or travel to or from the event, **INCLUDING THE RISK OF ANY NEGLIGENCE OF THE ABOVE-LISTED ENTITIES**.

I further agree that this Release cannot be modified unless such modification is in writing and signed by authorized representatives of both parties, that this document contains the entire agreement between the parties and if any term or provision of this agreement is found invalid or unenforceable, the remaining terms and provisions of this agreement shall remain binding and enforceable. I further agree that should I or my successors assert any claim in contravention of this agreement, I or my successors shall be liable for the expenses (including legal fees) incurred by the other party or parties in defending against such a claim unless they are found liable for willful and wanton negligence.

My signature below is evidence of my understanding of and agreement to the above stated terms.

Date

Parent/Guardian Printed Name

Parent/Guardian Signature

Phone

Incident Report Form

Page 1

Event Name _____ Date _____

Event Point of Contact _____ Phone _____

Email _____

Name of Reporting Person _____ Title _____

Address _____

Phone _____ Alternate Phone _____

Email _____

Event Date _____ Event Type _____

Name of Co-Sponsor _____ Sponsor Name of Contact _____

Co-Sponsor Insurance (if any) _____

Date of Incident _____ Time _____

Name of Injured Person _____ Parent/Guardian _____

Address of Injured Person _____

Phone _____ Email _____

Type of Injury _____

Signed Waiver Form Attached? (yes) (no)

If no, where is the form? _____

Witnesses: Name/Address/Phone/Email _____

Was injured party taken to the hospital? (yes) (no) Transported by ambulance? (yes) (no)

Hospital Name _____

Hospital Address _____

Physician _____

Use page 2 to report details of incident.

Incident Report Form

Page 2

1. Report actual circumstances of incident.

2. Report all actions of event workers/witnesses, other people.

3. Report on any follow-up and/or suggestions made to injured person or parent/guardian.

4. Report on any other action/activity relating to incident.

5. Attach event promotional materials, waivers, and witness statements.

Sample Donation Request Letter

Manager's Name
Name of Business
Street Address
City, TX ZIP Code
Date

Dear **[Manager's name]**:

[Name of school] will be hosting **[Event Name]** on **[list every day of your school's event]**. To help support our **[bike/walk]** safety event, we are seeking donations of **[list the number and type of items]** from your business.

We believe your business will also benefit from your support of this event. In exchange for your donation, your business will receive:

[Below are some suggested ways to recognize and thank your sponsors]

- Recognition on the school website and/or social media.
- Publicity at the event welcome table.
- Recognition in our school e-newsletter sent to all families.
- A tax-deductible donation receipt (on request).

Walking and biking are simple, effective, and largely affordable ways for children to get the recommended 60 minutes of physical activity each day.

[Event Name] encourages students and their families to bike and walk, making the community safer and more friendly for all. Thank you in advance for supporting the safety, health, and happiness of our community. I will call you next week to answer any questions you have about this request. You may also contact me at **[your phone number]** or **[your e-mail address]**.

Sincerely, **[Your name]**

[Position or Event Title]

Get Up and Goal! Mileage Tracking



**Safe Routes
to School** TxDOT

Whether you walk, roll, bike, scooter, or roller skate to school,
use this handy mileage log to track how far you go each week!

Name: _____

School: _____

DATE	MILEAGE	WEATHER	ACTIVITY
Week One			
		☀ ☁ ☔	
		☀ ☁ ☔	
		☀ ☁ ☔	
		☀ ☁ ☔	
		☀ ☁ ☔	
Total: _____			

Week Two			
		☀ ☁ ☔	
		☀ ☁ ☔	
		☀ ☁ ☔	
		☀ ☁ ☔	
		☀ ☁ ☔	
Total: _____			

Week Three			
		☀ ☁ ☔	
		☀ ☁ ☔	
		☀ ☁ ☔	
		☀ ☁ ☔	
		☀ ☁ ☔	
Total: _____			

Week Four			
		☀ ☁ ☔	
		☀ ☁ ☔	
		☀ ☁ ☔	
		☀ ☁ ☔	
		☀ ☁ ☔	
Total: _____			

4-Week Total: _____