



Keller Family Community Foundation
P.O. Box 164 Richmond, MN 56368
www.SNOWBALLCANCER.org

Snowball Cancer 2019 – Valentine 500 (miles) ride taking place Thursday, February 7, 2019

First Name: _____

Last Name: _____

I hereby release Keller Family Community Foundation (KFCF)/Snowball Cancer and Nick Keller from any responsibility for injuries or damages that I may suffer as a result of my participation in this event (Snowball Cancer 2019 –Valentine 500 ride). I also understand and agree that any sponsor may subsequently use for publicity and/or promotional purposes my name and/or photographs or videotapes of me participating in this event without obligation or liability to me. I also understand that all money collected for pledges and donations are not refundable. I certify my compliance by my signature below.

Signature: _____

Date: _____

In case of emergency contact:

Name _____ Phone Number _____