

**Wheels for Winners Liability and Consent Form**

229 S. Fair Oaks Ave, Madison, WI. 53704

(608) 249-2418

Dear Parent or Guardian: Please complete and return this form to Wheels for Winners, Inc. in order for your child to receive the bicycle he/she has earned.

I understand that this document is a liability waiver and release of liability that I am entering into with Wheels for Winners Inc. (hereinafter referred to as Wheels for Winners), a Wisconsin non-profit corporation. I am agreeing with the terms and conditions of this liability waiver both on my own behalf and on the behalf of my child (named below) as parent or guardian of my child. In consideration for the repairs and maintenance performed on my child's bicycle by Wheels for Winners staff and volunteers, I, on behalf of my child, myself, our heirs, executors, administrators, successors, and assigns hereby agree to release from liability, defend, indemnify and hold harmless Wheels for Winners, Inc. and its Board of Directors, paid staff, volunteers, and affiliated entities and their employees or agents from any claims or lawsuits whatsoever that may arise by virtue of my child's use of his/hers bicycle following maintenance by Wheels for Winners, including, but not limited to, claims for personal injury and property damage to me, my child or to third parties. I agree that I will assume responsibility for any and all consequences of the use of this bicycle resulting from any defects. I realize that I have a duty to inspect the bicycle before I or my child rides it and that I have the right to have the bicycle inspected, at my own cost, by a professional bicycle mechanic before I or my child rides it.

I also consent to the use of photographs or videos of me and/or my child taken during community service and Wheels for Winners activities by any representative of Wheels for Winners in any media.

I agree that this liability waiver and photo/video consent constitutes the whole agreement between myself, individually, and on behalf of my child as parent or guardian and Wheels for Winners regarding any and all repairs or maintenance performed on my or my child's bicycle. By signing this waiver and consent form I acknowledge that I have entered into this agreement freely and voluntarily and I agree to be bound by all terms contained in this document.

**Print Name of Parent or Guardian** \_\_\_\_\_

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

**Print Name of Child** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_, **WI** **Zip** \_\_\_\_\_

**Telephone Number** \_\_\_\_\_ **E-mail address** \_\_\_\_\_

**Bicycle inventory #** \_\_\_\_\_

**Madison bike license # [only for City of Madison residents]** \_\_\_\_\_

**Helmet:** Y N **Lock:** Y N

**Signature of volunteer :** \_\_\_\_\_ **Date:** \_\_\_\_\_

# Wheels For Winners

## How I Earned My Bicycle By Helping My Neighborhood

I helped my community and neighborhood by:

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Tally your hours \_\_\_\_\_

Verification by Host

(sign) \_\_\_\_\_

(print) \_\_\_\_\_

Host organization: \_\_\_\_\_

Phone: \_\_\_\_\_

Name of Participant: \_\_\_\_\_