

**FLAVORS OF WISCONSIN JULY 14 - 20, 2019 REGISTRATION FORM**

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ \*Gender \_\_\_\_\_ \*Age \_\_\_\_\_

Email \_\_\_\_\_ (Used only to communicate with you about the tour.)

Emergency Contact: \_\_\_\_\_ Phone \_\_\_\_\_

\*Fill in gender and age information only if you would like us to try to find you a roommate

\_\_\_\_\_ Yes, I have a roommate. Name \_\_\_\_\_

Relationship to you \_\_\_\_\_

Do you require two separate beds? \_\_\_\_\_

\_\_\_\_\_ Please assign me a roommate (No additional cost. We'll do our best, but cannot promise a roommate.)

Type of bicycle you will be riding (i.e. road, touring, mountain, tandem, recumbent)

\_\_\_\_\_

How did you find out about Around Wisconsin Bicycle Tours? (If through the web, please tell us which website)

\_\_\_\_\_

(2)

T-Shirt Size (optional, additional cost). For T-shirt fabric and size information, please see page four of this form.

**Circle One: Men's XS S M L XL XXL 3XL**

**Women's XS S M L XL XXL**

Optional after bike activities. Please check all those you plan to participate in. There will be time after the day's bike ride to do them all.

\_\_\_\_\_ Tuesday tour of Galena Brewery (\$0)

\_\_\_\_\_ Wednesday afternoon trolley tour of historic Galena plus visit to local winery for tour and/or tasting (\$20 additional fee paid with balance.) If required minimum number of sign ups is not reached fee will be refunded to you.

\_\_\_\_\_ Thursday tour of the National Historic Cheesemaking Museum in Monroe (\$0)

**Choose items below to determine your total tour cost and balance due after deposit.**

ITEM	PRICE	MY COST
Basic Ride Package	\$925.00	\$ _____
Registration sent after 4/30/19	\$ 50.00	\$ _____
Private Room	\$450.00	\$ _____
Short Sleeve T-Shirt	\$25.00	\$ _____
Galena trolley/wine tour	\$20.00	\$ _____
TOTAL AMOUNT DUE		\$ _____
Minus required deposit		\$ - 450
<b>THIS BALANCE Due by June 12, 2019</b>		\$ _____

Deposit payment methods and cancellation policy are detailed on page three of this form.

**Registration closes July 1, 2019 or when maximum rider limit of 40 is reached.**

(3)

**To complete registration**, carefully read and sign the waiver on page five, and mail it along with this registration form to Around Wisconsin Bicycle Tours, 5412 County Rd. N, Pickett, WI 54964. Once we receive your completed registration form, signed waiver, and a \$450 deposit, we will send you a tour confirmation and deposit receipt email within two weeks. You will receive additional information about the tour around the beginning of July.

### **Payment Methods**

Send a check or money order payable to Around Wisconsin Bicycle Tours and mail it to Around Wisconsin Bicycle Tours, 5412 County Rd. N, Pickett, WI 54964  
BETWEEN JANUARY 1 AND JANUARY 10, 2019 FOR REGISTRATION FORMS SENT DURING 2018. SEND CHECK WITH REGISTRATION FORM AFTER JANUARY 1, 2019.

OR

Pay by credit or debit card in one of two ways (\$10.00 additional fee per registrant). If paying by credit card your statement will show this payment as WINDSONGLO or WINDSONG LODGING which refers to a business we own through which we process credit cards.

1. Call 920-279-5539 between 10 a.m. and 7 p.m. central time seven days a week ( Visa, Mastercard, or Discover accepted) BETWEEN JANUARY 1, 2019 AND JANUARY 10, 2019 FOR REGISTRATION FORMS SENT DURING 2018. CALL WITHIN FIVE DAYS OF SENDING REGISTRATION FORMS IF YOU ARE REGISTERING AFTER JANUARY 1, 2019.

OR

2. Use the pay pal basket (available after January 2, 2019) on the web registration page. A pay pal account is not needed. DEPOSITS FOR REGISTRATION FORMS SENT DURING 2018 ARE DUE JANUARY 10, 2019. DEPOSITS FOR REGISTRATION FORMS SENT AFTER JANUARY 1, 2019 ARE DUE WITHIN FIVE DAYS OF SENDING REGISTRATION FORM.

**Cancellation Policy: Once received, deposits and final payments cannot be returned due to required payments we must make to hotels and restaurants. We strongly recommend travel insurance. Although we have no business relationship with the Allianz Travel Insurance Company, we have used them for personal travel in the past and found them to be a reputable company. They will cover a week-long tour at our price for around \$45 to \$90 per person based on age. Their website is [www.allianztravelinsurance.com](http://www.allianztravelinsurance.com) . Please read carefully their covered reasons for cancellation, as they will not cover you if you cancel just**

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because you changed your mind. If tour is cancelled by us for any reason, all money paid will be returned to you. If tour fills and there is a waiting list, we will substitute a rider on the list for you if possible and return to you all money paid minus the cost for processing your credit/debit card if you paid with a credit/debit card.

### T-SHIRT INFORMATION

We are offering Heather Contender Dry Fit 100% polyester T-shirts by TekTalk. They are made of cool moisture-wicking fabric with superior breathability and come in both men's and women's sizes. The women's shirts have a slightly lower crew neckline, are a bit shorter, and have a gently contoured rather than tightly form fitted silhouette. They will of course be printed with a design and the tour name and logo. Additional cost \$25 to be paid with balance due June 12, 2019.

#### SIZE CHART MEN

	<b>XS</b>	<b>S</b>	<b>M</b>	<b>L</b>	<b>XL</b>	<b>2XL</b>	<b>3XL</b>	
<b>Chest</b>	<b>32-34</b>	<b>35-37</b>	<b>38-40</b>	<b>41-43</b>	<b>44-46</b>	<b>47-49</b>	<b>50-52</b>	



#### SIZE CHART WOMEN

	<b>XS</b>	<b>S</b>	<b>M</b>	<b>L</b>	<b>XL</b>	<b>XXL</b>	<b>3XL</b>	
<b>Size</b>	<b>2</b>	<b>4/6</b>	<b>8/10</b>	<b>12/14</b>	<b>16/18</b>	<b>20/22</b>	<b>24/26</b>	
<b>Bust</b>	<b>3-34</b>	<b>35-36</b>	<b>37-38</b>	<b>39-41</b>	<b>42-44</b>	<b>45-47</b>	<b>48-51</b>	



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### RELEASE AND WAIVER OF LIABILITY

I understand that this Release and Waiver of Liability applies to my participation in Around Wisconsin Bicycle Tours' Flavors of Wisconsin Bicycle Tour taking place on July 14 - 20, 2019. This is a legal document and its intent is to prevent you and anyone representing your interests from being able to sue Around Wisconsin Bicycle Tours LLC, its owners, staff, volunteers, and any other parties connected with this event in any way for any injury, death, property damage or other loss to you that occurs as a result of your participation in the Flavors of Wisconsin Bicycle Tour taking place on July 14 - 20, 2019. If you have any questions about the terms of this document or their legal significance, consult with an attorney before signing it.

#### **Flavors of Wisconsin Bicycle Tour Release and Waiver of Liability:**

1. In signing this release, I acknowledge that I understand the nature of Flavors of Wisconsin Bicycle Tour specifically and bicycle touring generally ("Activity") and represent that I am qualified, in good health, and in proper physical condition to participate in the Activity. I further acknowledge that the Activity will be conducted over public roads and facilities open to the public during the Activity and upon which the hazards of traveling are to be expected. I further agree and warrant that if, at any time, I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. Further, I acknowledge and understand that the scope of the activity includes, but is not limited to bicycling, equipment transport, personal transport, food services, sleeping and personal care facilities and arrangements and otherwise.
  2. I fully understand that (a) the activity involves risks and dangers of serious bodily injury, including but not limited to permanent disability, paralysis and death("Risks"); (b) these risks and dangers may be caused by my own actions, or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or the negligence of the "Releasees" named below; (c)there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time.
  3. The foregoing understood, I hereby release and waive any and all claims against Around Wisconsin Bicycle Tours LLC, Patricia and Kenneth Spiegelberg, major sponsors, cooperating organizations, and any other parties connected with this event in any way, ("Releasees") singularly or collectively, and further hold harmless and indemnify such releasees from and against any liability, claims of negligence, misadventure, harm, loss, inconvenience or damage hereby suffered or sustained as a result of participation in the Flavors of Wisconsin Bicycle Tour or any other activity associated therewith. The foregoing notwithstanding, this is NOT a release and waiver of intentional or reckless acts. Such release, waiver, hold harmless and indemnity shall apply to my own claims and /or claims of third parties including but not limited to spouse and family members, relating to my participation in this event. This waiver is made in the state of Wisconsin and the laws of Wisconsin govern its terms regardless of the participant's place of residency.
  4. I hereby consent to and permit emergency treatment, in the event of injury, illness or death. Around Wisconsin Bicycle Tours LLC reserves the right to decline accepting or retaining any tour participant whose health or actions impede the operation of the tour or welfare of other tour participants.
  5. I give full permission for use of my name and photograph, motion pictures, videotapes, recording or other record of this event for any legitimate purpose including print and internet advertising of Around Wisconsin Bicycle Tours.
  6. I have read this agreement, fully understand its terms, understand that I have given up substantial rights by signing it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of liability, within its terms, to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance notwithstanding, shall continue in full force and effect.
- The undersigned acknowledges having read and agreed to the terms of the foregoing Release and Waiver of Liability agreement. In this regard, the undersigned acknowledges and agrees that if the terms of the agreement are not acceptable the undersigned has the choice and option to forego participation in this voluntary event.

Name of Participant (please print)

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Signature of Participant

Date

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