



2020 Sea Gull Century Registration Form

Salisbury University • Salisbury, MD

VIRTUAL TOUR
Saturday, October 3, 2020 -
Saturday, October 10, 2020

Credit Card Purchases*: Please complete the following information: MasterCard Visa

Card number

Three-digit security number (on back of card)

Exp. Date _____ Signature _____
(Required for charge purchases)

*This charge will appear as Salisbury University Foundation, Inc./SU Foundation, Inc. on your statement.

Check Purchases: Make check payable and mail with Registration Form to:
SU Foundation, Inc. - Sea Gull Century
P.O. Box 2655, Salisbury, MD 21802-2655

RIDER INFORMATION

FIRST NAME _____ MIDDLE INITIAL _____ LAST _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ E-MAIL ADDRESS _____

AGE _____

Male Female

Virtual Tour

Circle T-shirt Size: S M L XL XXL

How many times have you participated? This is my _____ Sea Gull Century.

Registration Fees & Optional Extras

Registration Fee (Includes 2020 Sea Gull Century T-shirt and exclusive gift package)\$35

I support the League of American Bicyclists\$ _____

Tax-deductible donation to Sea Gull Century Scholarship\$ _____

Tax-deductible donation to SU Student Emergency Fund\$ _____

Grand Total\$ _____

www.seagullcentury.org **Connect with us!**

SU is an Equal Opportunity/AA/Title IX university and provides reasonable accommodation given sufficient notice to the University office or staff sponsoring the event or program. For more information regarding SU's policies and procedures, please visit www.salisbury.edu/equity.

RELEASE FORM

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT ("AGREEMENT"): In consideration for being permitted to participate in any way in the 2020 Sea Gull Century (virtual tour) ("ACTIVITY") on October 3-10, 2020, an event sponsored by Salisbury University, I, for myself, my personal representatives, assigns, heirs and next of kin:

1. ACKNOWLEDGE, agree and represent that I understand the nature of bicycling activities and that I am qualified to participate in such Activity. I further acknowledge that the Activity will be a virtual tour, at the discretion of the registered cyclist (myself). 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.

2. UNDERSTAND that all participants in the Activity are required to wear BICYCLING HELMETS, and I agree to wear a bicycle helmet while riding a bicycle as part of any event connected with the Activity.

3. HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS Salisbury University, its administrators, officers, volunteers, staff, agents and employees.

4. I give Salisbury University UNRESTRICTED PERMISSION to use and/or publish pictures of me for promotional purposes. I hereby waive any right that I may have to inspect and approve the finished product or copy that may be used in connection with an image that the photographer has taken of me or the use to which it may be applied. I further release Salisbury University from any claims for remuneration associated with any form of damage, foreseen or unforeseen, associate with proper commercial or artistic use of the images.

5. I understand that my registration information will not be shared or released to other businesses for solicitation purposes.

6. Sea Gull Century does not refund fees or transfer registration to another year.

I have read this agreement, fully understand its terms, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid that the balance, notwithstanding, shall continue in full force and effect.

I have read and agree

 PARTICIPANT'S SIGNATURE DATE

 SIGNATURE OF PARENT/GUARDIAN (IF UNDER AGE 18) DATE

3 2ND ANNUAL SEA GULL CENTURY