



**Clermont Cycle & Seek ~ Bicycle Scavenger Hunt**  
**March 23, 2019 ~ 12:00pm to 3:00pm**

Day of Registration starts at 11:00am under the Waterfront Park Pavilion.

Clermont Cycle & seek will begin and end at Waterfront Park, 330 3<sup>rd</sup> St., Clermont, FL 34711. You and your 2 to 4-person team (all ages welcome) will be taking up to a 5-mile bike ride through Waterfront Park on the trail, Lake Hiawatha, and our beautiful downtown area Montrose Street. This is a go at your own pace scavenger hunt, you will be getting off and on your bikes to find some of the answers.

**This is a FREE event. To participate, and for the opportunity to win some fun prizes, please mail or drop this form off at:**

**Clermont City Center**  
**Attention: RIDE & SEEK**  
**620 W. Montrose St.**  
**Clermont FL, 34711**

Suggested equipment to bring along, bicycle, backpack, phone with picture taking capabilities, water bottles, minors must wear helmets.

Rider 1		Rider 2	
Name:	_____	Name:	_____
Address:	_____	Address:	_____
_____		_____	
Phone:	_____	Phone:	_____
Email:	_____	Email:	_____
Rider 3		Rider 4	
Name:	_____	Name:	_____
Address:	_____	Address:	_____
_____		_____	
Phone:	_____	Phone:	_____
Email:	_____	Email:	_____

If you have any questions or need more information, please call 352-708-5975

**\*\*EVENT MAY BE POSTPONED OR CANCELLED DUE TO WEATHER\*\***

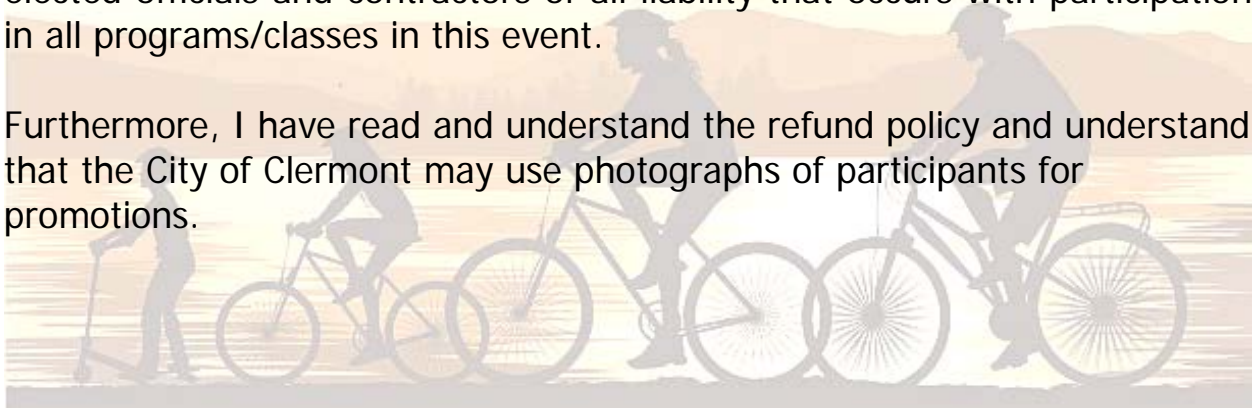
# LIABILITY WAIVER

Emergency Treatment Release: In the event I cannot be contacted to make arrangements for emergency medical treatment I authorize the person in charge to seek and obtain emergency medical treatment for myself or my child. I also authorize transportation to the nearest medical facility in the event it should become necessary.

Liability Waiver: I agree to indemnify, defend, and hold harmless the City of Clermont, its elected and appointed officials, representatives, and any employee or agent of the City of Clermont from any and all claims on behalf of any person, firm, corporation, or agent, including the Instructor, arising from participation in this activity/activities. I certify that I understand any dangers inherent to my participation in this activity/activities and further state that I am physically sound enough to participate.

I hereby relieve the City of Clermont, its employees, agents, instructors, elected officials and contractors of all liability that occurs with participation in all programs/classes in this event.

Furthermore, I have read and understand the refund policy and understand that the City of Clermont may use photographs of participants for promotions.



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Name (please print)

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Signature (Parent/Guardian for minors)

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Date