# FLORIDA KEYS BIKE RIDE December 7-13 2025

Please complete registration, read and sign waiver, and mail to:

## PEDAL ACROSS WISCONSIN INC. 10387 Eastwood Dr Huntley IL 60142

Or Email PDF: kennethjgoldman@yahoo.com

All riders/non-riders sign waiver. Multiple riders may share registration form.

			M	Age	F	Age
First name	Last name	<del>)</del>				
Street	City			State	Zip	
Home Phone	Cell Phone	Your ema	il PLEA	SE PRINT	Email	confirmation v
Emergency Contact & F	Phone					
	d/Hybrid Trike Tanden i included in tour fees. Fo 7			e: Under 35 ackcounti		Over 35 lbs vboy
Roommate: Do you n	need PAW to help you fin	nd a roommate?	YES	NO		
If you have a roommate	, please provide name:			7		
Group meals:		Name	)	our roon	ımate	's Email
	etary needs or intolerance	s that requires a	special		ssible	?
Do you have special die	oly: 1. Gluten intolerance	2. Vegan		getarian		
Do you have special die Please check all that app	Across Wisconsin? If so	2. Vegan	3.Ve			
Do you have special die Please check all that app	ply: 1. Gluten intolerance	2. Vegan o, how did you	3.Ve			
Do you have special die Please check all that app First tour with Pedal A Friend: Name:	oly: 1. Gluten intolerance Across Wisconsin? If so	2. Vegan o, how did you Bike Clu	3.Ve hear al	oout us?		
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Do you have special die Please check all that app First tour with Pedal A Friend: Name: Internet: Website  FOR PAW USE ONLY:	oly: 1. Gluten intolerance Across Wisconsin? If so	2. Vegan o, how did you Bike Clu Other	3.Ve hear al	oout us?		

#### **TOUR FEES:**

**All Tour Fees Include:** Hotel Monday December 8 thru Saturday morning December 13. Two Group Dinners, 4 Upgraded Full Hot Breakfast Buffets @ DoubleTree restaurant, 1 Hot Continental Breakfast, Baggage Transport, Cue Sheets, Sag Support, On-Route Food Stops and Parking for the week at Fairfield Inn & Suites Marathon, FL.

#\_\_\_\_ Adults @ \$1445 Per Rider (Based on 2 in a room; each person pays \$1445)
For PRIVATE ROOM add \$775 (No roommate; 1 person per room)

<u>NOTE:</u> Cycling begins Monday <u>December 8.</u> PAW has secured a group rate for hotel rooms <u>Sunday December 7</u> the night before tour begins @ <u>Fairfield Inn & Suites Marathon FL</u>

#\_\_\_\_ Adults: Hotel Room Sunday December 7 @ Fairfield Inn & Suites Marathon FL.

Includes welcome snacks & drinks. Hotel breakfast included.

**\$109 per person** Assumes 2 persons per room. (Price includes tax)

\$218 Private Room (No Roommate) (Price include tax)

**Mon-Riders:** @ 1085 per person: Non-riders may attend when sharing room with rider. Non-rider fee includes hotel Monday December 8 thru Saturday morning December 13. 2 group meals, access to food stop snacks. Non-riders are responsible for their own transportation and baggage transport.

## **JERSEYS: SEE PICTURE CLICK HERE**

### FLORIDA KEYS JERSEY

MENS WOMENS: M L XL 2X 3X Quantity: @ 60 each \$

Additional Jersey Mens: Womens: Size: \$60 each \$

TOTAL TOUR FEES Including Jersey(s) & HOTEL OPTION 12/7 \$

**DEPOSIT ENCLOSED** (Minimum 50% of total tour fees) \$

BALANCE DUE OCT 1<sup>st</sup> 2025

CHECK PAYABLE: Pedal Across Wisconsin Inc. (Please do not use abbreviation PAW)
ZELLE ALSO ACCEPTED: kennethjgoldman@yahoo.com
Please write "Florida Keys" & your name in memo. Please DO NOT send signature required mail

Cancellation Policy Per Person: Through September 1: \$90 fee. (All deposit money returned minus \$90. After 9/1, the maximum refund will be equal to the total returned by hotels and restaurants to PAW. NOTE: IF YOU HAVE A ROOMMATE, private room fee of \$775 plus \$109 for Sunday night room) will be assessed, in addition to these cancellation fees, if no replacement can be found. Cancellation of Event by Pedal Across Wisconsin due to Acts of God or other Force Majeure: Pedal Across Wisconsin Inc., at its sole discretion, has the right to cancel all or any part of this event and any related events and activities due to occurrence of any force majeure event, or credible threat thereof, including but not limited to any Act of God, fire, earthquake, hurricane, acts of civil or military authority, casualty, flood, war, terrorist attack, epidemic, insurrection, civil unrest, strikes or other labor activities or any other similar cause beyond the reasonable control of Pedal Across Wisconsin Inc., including environmental conditions that might threaten the health and safety of participants, volunteers or staff. If all or any portion is cancelled due to a force majeure event, all registrations fee refunds are dependent upon total returned by hotels & restaurants to PAW.

Pedal Across Wisconsin, Inc. Release and Waiver of Responsibility: In signing this release, I acknowledge that I understand the nature of the Pedal Across Wisconsin, Inc. tour ('activity') and that it is a potentially hazardous event, and attend it of my own free will and choice. In choosing to attend Pedal Across Wisconsin, Inc.'s activity and any related events or activities, I fully assume all risks, whether before, during or after the Pedal Across Wisconsin, Inc. activity or related activities. These include, without limitation, collision with pedestrians, vehicles, other riders, sponsors, promoters, or drivers, and dangers arising from falls, camping, theft, road surface, equipment failure, inadequate safety equipment, weather conditions, as well as the possibility of physical and/or mental trauma, mental injury, emotional stress, serious bodily injury resulting in disability, death and paralysis. I realize Pedal Across Wisconsin, Inc. activities require physical conditioning, and I represent myself that I am in sound medical condition, capable of participating without risk to others and myself. I have no medical impediment that would endanger others or myself. I waive any and all specific notices of risks. I agree that maps, directions, leaders and road markings are provided for my convenience only, and not to guarantee a safe route or trip. I understand and agree that a situation may arise during the Pedal Across Wisconsin, Inc. activity, which may be beyond the control of the sponsors, promoters, or organizers, and agree to participate so as not to endanger others and myself. I understand that any route or activity chosen as part of our outdoor adventure may not be the safest, but has been chosen for the interest or challenge provided. I understand the route requires bicycling on public roadways, and in bad weather, and that cyclists have been hospitalized and/or killed because of accidents that are either their responsibility or the responsibility of someone else. I further agree that I will bear and assume all expenses incurred in any accidents, illness, or loss of any kind. 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. I hereby consent to and permit emergency treatment in the event of injury, illness or death. I give full permission for use of my name and photograph, motion pictures, video tape, recording, written comments or opinions, or other records of this event for any legitimate purpose. Pedal Across Wisconsin, Inc. 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. An approved (ANSI or Snell or equal) helmet is strongly recommended for use by all participants while riding bicycles. I agree to the terms and conditions of the Pedal Across Wisconsin, Inc. cancellation policy. I park my vehicle at my own risk and acknowledge the safe-keeping of my bicycle as my responsibility. I have read this agreement, fully understand all the terms it contains, and 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 all liability 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 to be in full force and effect. Any action to interpret or enforce it shall be brought in Kane County, in the State of Illinois. The foregoing understood and agreed, I hereby release and waive any and all claims against Pedal Across Wisconsin, Inc. sponsors, workers, volunteers, organizations, schools, businesses, and any other parties connected with this event in any way ('releases') singularly or collectively, and further hold harmless and indemnify such releases 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 Pedal Across Wisconsin, Inc. tour, or any other activity associated here within. Such release, waiver, hold harmless and indemnity shall apply to my own claims and/or claims of third parties, relating to my participation in this event. I waive, release, discharge for myself, my heirs, executors, administrators, legal representatives (including successors) any and all rights and/or claims which I have, may have, or may hereafter accrue to me against the sponsors and promoters of Pedal Across Wisconsin, Inc. or other sponsors or affiliated organizations and their respective agents, officers, and employees for any and all damagers, injuries or claims which may be sustained by me directly or indirectly arising out of my participations in Pedal Across Wisconsin, Inc.. I agree to abide by the rules of the road and certify that I will read the Pedal Across Wisconsin, Inc. safety letter when sent to me. The undersigned acknowledges having read and agreed to the terms of the foregoing Release and Waiver of Liability agreement, and also acknowledges they have read the safety letter. Pedal Across Wisconsin, Inc. Waiver, Release of Liability and Indemnification Agreement Infectious Diseases - Including, but not limited to COVID-19 and its Strains and Variants. In consideration of your participation in Pedal Across Wisconsin, Inc.'s Tours, Rides and Related Activities and Events (collectively, the "Event"), you, the undersigned, acknowledges and agrees as follows: 1. While Pedal Across Wisconsin will take precautions before and during the Event to limit exposure and reduce the risk to infectious diseases, including but not limited to COVID-19 and its Strains and Variants, MRSA, influenza, and other communicable diseases, known and unknown (collectively, "Infectious Diseases"), the risk of serious illness and death exists. 2. You, as a participant, agree to abide by all rules and regulations related to the reduction of exposure to and risk of Infectious Diseases as directed by the Event personnel, and you agree to use reasonable precautions yourself to avoid spreading infection to others. 3. You knowingly and voluntarily assume all risks associated with the possible existence and consequences of Infectious Diseases, even if these risks result from the acts of others, and you agree to assume all responsibility of said participation in the Event. 4. You agree that you will comply with all rules and regulations for participation with respect to Infectious Diseases. These rules and regulations may change from time to time, before or during the Event as the situation may require and you agree to abide by any changes. 5. If you have been diagnosed with an Infectious Disease prior to the scheduled Event and have not been cleared by a licensed physician who has personally examined you, then you agree to not participate until such time as you are cleared. Nonparticipation under this Section is subject to the cancellation and refund rules of your registration. 6. If at any time during the Event you feel you may have symptoms consistent with exposure to Infectious Diseases, you agree to immediately remove yourself from participation and safely advise Event personnel immediately. 7. RELEASE. You, for yourself and on behalf of your heirs, assigns, personal representatives and next of kin, do hereby release and hold harmless Pedal Across Wisconsin, Inc., its shareholders, directors, officers, agents, employees, assigns, and the other participants of the Event (collectively the "Releasees"), with respect to any loss, injury, illness, disability or death, from exposure of any Infectious Disease resulting from your participation in the Event, whether said exposure was the result of negligence, gross negligence or reckless conduct from any participant or Event Personnel involved with the Event, to the fullest extent permitted by law. SIGNED ACKNOWLEDGEMENT: I have read this Waiver, Release of Liability and Indemnification Agreement. I fully understand its terms, and further understand that by signing it, I am giving up substantial rights by signing it. I am doing this freely and voluntarily and without any undue influence or inducement.

# EACH PARTICIPANT MUST SIGN WAIVER

I acknowledge I have read **SAFETY LETTER**. (Link is on registration website page)

Signature (Typed is OK) of Adult Participant Printed Name (Typed OK) Date