

JUNIOR RIDERS RELEASE FORM – GUARDIAN’S CONSENT

I, the undersigned parent/guardian of the junior rider _____,
for and in consideration of his/her participation in the Amwell Valley Pace Ride, do
hereby accept the terms of the above release on behalf of the participant and myself.

Further, I consent to authorize any officer, director, advisor or supervisory personnel
of the Amwell Valley Trail Association, Inc. to consent on my behalf to any emergency
medical treatment which may be required for the participant and do agree to
indemnify and hold harmless anyone giving consent. I declare under penalty of
perjury that the foregoing is true and correct.

Name: _____ Signature: _____ Date: _____

I, the undersigned parent/guardian of the junior rider _____,
for and in consideration of his/her participation in the Amwell Valley Pace Ride, do
hereby accept the terms of the above release on behalf of the participant and myself.

Further, I consent to authorize any officer, director, advisor or supervisory personnel
of the Amwell Valley Trail Association, Inc. to consent on my behalf to any emergency
medical treatment which may be required for the participant and do agree to
indemnify and hold harmless anyone giving consent. I declare under penalty of
perjury that the foregoing is true and correct.

Name: _____ Signature: _____ Date: _____

I, the undersigned parent/guardian of the junior rider _____,
for and in consideration of his/her participation in the Amwell Valley Pace Ride, do
hereby accept the terms of the above release on behalf of the participant and myself.

Further, I consent to authorize any officer, director, advisor or supervisory personnel
of the Amwell Valley Trail Association, Inc. to consent on my behalf to any emergency
medical treatment which may be required for the participant and do agree to
indemnify and hold harmless anyone giving consent. I declare under penalty of
perjury that the foregoing is true and correct.

Name: _____ Signature: _____ Date: _____