

***JOY RIDES DUNEDIN  
GUEST INFORMATION***

The guest information and release forms must be completed for the initial trishaw ride. Unless the information changes, they are not required for subsequent rides.

*Name of Guest:*

*Phone Number:*

\_\_\_\_\_

*Address:*

\_\_\_\_\_

*Emergency Contact:*

*Phone Number:*

\_\_\_\_\_

*Relationship to Guest:*

\_\_\_\_\_

*How did you hear about Joy Rides Dunedin?*

\_\_\_\_\_

\_\_\_\_\_

*Note: People who CANNOT participate in Joy Rides are individuals who have postural issues, decubitus (pressure) ulcers, or other conditions that prohibit them from sitting upright in the passenger seat. Also those with extreme, unpredictable behaviors, and those with acute illnesses.*

*Do not write below this line*

.....

*Date:* \_\_\_\_\_

*Location:* \_\_\_\_\_

*Release forms:*    *Liability*    *Media*

*Received by:* \_\_\_\_\_

# **JOY RIDES DUNEDIN PARTICIPANT RELEASE**

*Joy Rides Dunedin* is a ministry of *First Presbyterian Church of Dunedin*, Florida. Their agents, officers, volunteers, employees and all other persons involved in *Joy Rides* are doing so without direct compensation. I hereby release, indemnify, and discharge *Joy Rides* and *First Presbyterian Church of Dunedin* on behalf of myself and/or on behalf of the participant as their Guardian.

1. I acknowledge my participation in bicycling entails known and unanticipated risks that could result in physical injury including death. The risks include accidents involving other bicycles and/or vehicles, collisions, falls, and other accidents caused by the conditions of roads, trails, terrain, or highways. I further understand that I may suffer from medical conditions which are not fully understood by the volunteers. Joy Rides volunteers have difficult jobs to perform and may be unaware of a participant's fitness or abilities.
2. I expressly agree and promise to accept and assume all the risks existing in this activity. My participation is purely voluntary and I elect to participate in spite of the risks.
3. I certify that I have adequate medical insurance to cover any injury or damage which I may cause or suffer while participating. I further assume the risk of any medical or physical condition I may have.

By signing this document, I release, indemnify, and discharge *First Presbyterian Church* and *Joy Rides* from liabilities.

*I HAVE HAD SUFFICIENT OPPORTUNITY TO READ THIS DOCUMENT.*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Print Name

## **RELEASE OF GUARDIAN (IF APPLICABLE)**

I certify that I am authorized to sign this Release on behalf of passenger. On behalf of passenger, I allow the passenger to participate in these activities. I have read the above Release. I further agree to indemnify and hold harmless on behalf of passenger *First Presbyterian Church*, *Joy Rides*, and all participants from all claims which are brought by or on behalf of passenger. *I have further explained to Joy Rides all of the known medical conditions or other items which may affect passenger's ability to successfully participate as a passenger.*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Family Member/Guardian

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Relationship to Passenger

***JOY RIDES DUNEDIN  
MEDIA RELEASE***

*First Presbyterian Church of Dunedin  
455 Scotland Street  
Dundin, Florida, 34698*

I do hereby grant the First Presbyterian Church of Dunedin permission to use my name, image (photo or video), and/or likeness in any or all of its publications, including website entries, social media posts, and printed materials, among various others.

I understand and agree that these materials will become the property of the First Presbyterian Church of Dunedin and will not be returned. I hereby irrevocably authorize the First Presbyterian Church of Dunedin to edit, alter, copy, exhibit, publish or distribute this photo for purposes of publicizing its programs or for any other lawful purpose.

In addition, I waive the right to inspect or approve the finished product, including printed or electronic copy, wherein my likeness appears. Furthermore, I waive any right to royalties or other compensation arising or related to the use of the image(s). I hereby hold harmless and release and forever discharge the First Presbyterian Church of Dunedin from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I have read this release before signing below and I fully understand the contents, meaning, and impact of this release. I understand that the permissions set forth in this document shall go into effect on the date of my signature below and will remain in effect indefinitely. However, *I understand that future permissions covered by this document can be withdrawn at any point by written request; though the permissions given in this document shall always remain in effect for the dates between my signature below and the written withdrawal.*

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*Printed Name*

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*Date*

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*Signature*

*Check here if signature of parent or guardian*