

INDIVIDUAL ENTRY FORM SEE PAGE 2

Anyone not riding a bicycle (driver, family members, or friends riding in a vehicle) must complete an entry form and a signed waiver for a non-rider wristband.

- PERSONAL DATA:** Birth date is required. No personal data is ever sold or made available to other companies. Must have a street address (no P.O. Boxes) for UPS delivery. Packets will be sent to this address in June.
- GROUP CONTACT:** If you are entering more than one person, one person must be designated as the Group Contact. **The group's wristband/credential packet will be sent to the Group Contact in June.** The Group Contact will be responsible for distributing the member's wristbands, credentials, jerseys and any vehicle passes requested.

The Group Contact will be responsible for sending in the following items listed below, together in one packet to RAGBRAI prior to the deadline:

- Individual Entry Forms for each member
 - Original signed waivers for each member
 - Group Summary with Vehicle Request Information
 - One payment to cover all costs for the group
- TYPE OF BICYCLE:** Please let us know what type of bicycle you plan to ride on RAGBRAI.
 - INDICATE RIDE STATUS:** Fill in the payment amount for your selection as a rider or non-rider. **Daily wristbands** are for the person who is not able to ride the full week. Mark which days you will be riding. Days need not be consecutive. Multiply number of days by amount per day for a total.
 - PREMIUM AND BASIC SOUVENIR PACK:** Basic Souvenir Pack (\$25) is a set of Des Moines Register newspapers with souvenir RAGBRAI sections from July 12 and July 19-26, 2009. Also included is a RAGBRAI XXXVII T-shirt (available in M, L, & XL). A **Premium Souvenir Pack** (\$40) includes all of the above, plus a RAGBRAI XXXVII poster. The pack *will be shipped 4-6 weeks after the ride.* Souvenir Packs require a street address, apartment number and phone number.
 - RAGBRAI JERSEY:** Check size box and fill in amount. A RAGBRAI XXXVII Jersey is available to RAGBRAI entrants at a reduced price of \$50. Jerseys are produced by Primal Wear. *Online price is \$60, plus shipping.* **Jerseys ordered with registration will receive discount and will ship at no extra charge with credential packets in June.**
 - TOTAL AMOUNT ENCLOSED:** Be sure to check your math. Applications with errors will be returned. Make check or money order **payable to RAGBRAI.**

AGREEMENT, WAIVER & RELEASE OF LIABILITY
 Every RAGBRAI participant must complete a waiver (See Page 3). It must have the original and authentic signature of the participant. **Faxes, scans or copies will be rejected.**

GROUP SUMMARY SEE PAGE 4

To be considered in the lottery as a group, the Group Contact must submit, prior to the deadlines, one packet containing all member's entry forms, all member's signed waivers, the group summary sheet (Page 4) and ONE payment.

- RIDER / NON-RIDER WRISTBANDS:** Indicate the total number of riders and non-riders in your group to calculate the total cost for fees. Anyone not riding a bicycle (driver, family members, or friends riding in a vehicle) must complete an application and a signed waiver for a non-rider wristband.
- VEHICLE PASSES:** Only 1,500 vehicle passes are issued at a cost of \$35 each. Any vehicle taken on the ride must have a vehicle pass. The driver and passengers traveling in vehicles must each complete a non-rider application as a member of your group for a wristband if they are not entering as riders. Vehicle passes are not necessary for vehicles left at the beginning or the end of the route. Information about the vehicle – driver's name and birth date must be completed for **each** vehicle pass requested. You must indicate what type of vehicle (Truck, RV/Bus or Other Vehicle) for which you are requesting a vehicle pass. **ONLY Groups of three or more (combination of riders and non-riders) are eligible to apply for a vehicle pass.**
- SOUVENIR PACKS:** Indicate the total group's quantity to calculate the total amount. Ensure a street address is included on the Individual Entry Form for proper delivery.
- JERSEYS:** Indicate total group's quantity including sizes ordered and calculate total jersey amount. **All jerseys will be sent to the Group Contact in June.**
- TOTAL AMOUNT ENCLOSED:** Add Rider, Non-Rider, Vehicle Passes Requested, Souvenir Pack and Jersey fees and enter amount. **SEND JUST ONE CHECK TO COVER ALL COSTS OF THE GROUP.** Make check or money order **PAYABLE TO RAGBRAI.**

LOTTERY RESULTS

On May 1, you will be able to view the lottery results at www.ragbrai.org to see if you have been selected in the lottery. Participant Packets will be sent in June to the **GROUP CONTACT**. If you are not selected in the lottery, a full refund will be mailed to you 4 to 6 weeks after the conclusion of the lottery.

REFUNDS

A \$25 processing fee per person is deducted for refunds requested prior to June 1. Fees are nonrefundable after June 1. RAGBRAI is not responsible for delayed, lost, or misplaced application forms and materials.

DUPLICATES

Duplicate entries will be rejected and so will all of the entries for the group(s) that are involved.

VERIFYING THAT YOUR ENTRY WAS RECEIVED

Your cashed check will verify that your entry was received. If you wish to receive confirmation that RAGBRAI received your entry, you must mail your entry with "delivery confirmation" of the delivery.

PLEASE CALL RAGBRAI AT 1-800-I RIDE IA (474-3342) IF YOU HAVE QUESTIONS ABOUT THE ENTRY PROCESS.

ALL PAPER APPLICATIONS MUST BE POSTMARKED NO LATER THAN FEBRUARY 16, 2009
MAIL TO: RAGBRAI Fees, PO Box 622, Des Moines, IA 50306-0622

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INDIVIDUAL ENTRY FORM - PAGE 2

Please read Instructions, Page 1.

RAGBRAI® XXXVII
JULY 19-25, 2009
The Des Moines Register

1 PERSONAL DATA

MR / MS	FIRST NAME	LAST NAME	BIRTH DATE REQUIRED (MM/DD/YYYY)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
STREET ADDRESS			APT/STE/UNIT
<input type="text"/>			<input type="text"/>
CITY	STATE	ZIP CODE #	COUNTRY (IF NOT USA)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
DAYTIME PHONE	HOME /CELL PHONE	OCCUPATION	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
E-MAIL			
<input type="text"/>			

2 ARE YOU THE GROUP CONTACT? YES NO

If you are entering more than one person, one person must be designated as the Group Contact. **The group's wristband/credential packet will be sent via UPS to the Group Contact in June.** The Group Contact will be responsible for distributing the member's wristbands, credentials, jerseys and any vehicle passes requested. **The Group Contact will be responsible for sending in the following items listed below, together in one packet to RAGBRAI prior to the deadline:** a) Individual Entry Forms for each member; b) Original signed waivers for each member; c) Group Summary with Vehicle Request Information; d) One payment to cover all costs for the group

3 TYPE OF BICYCLE YOU ARE RIDING? _____

Example: tandem, recumbent, road, hybrid, etc.

4 INDICATE RIDE STATUS (Tell us what you will be doing on the ride. Mark only one.)

WEEK-LONG RIDER (just riding a bicycle)	\$140	\$ _____
WEEK-LONG NON-RIDER (driving a vehicle or a passenger in a vehicle)	\$35	\$ _____
DAILY WRISTBANDS	Number of days _____ x \$25 a day	\$ _____

(Please check which days you are requesting Daily Wristbands below)

SUN 7/19	MON 7/20	TUE 7/21	WED 7/22	THUR 7/23	FRI 7/24	SAT 7/25
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5 PREMIUM AND BASIC SOUVENIR PACK

Premium Souvenir Pack includes a RAGBRAI XXXVII poster and T-shirt. \$40 \$ _____

Please indicate T-shirt size. M L XL

Basic Souvenir Pack includes a RAGBRAI XXXVII T-shirt. \$25 \$ _____

Please indicate T-shirt size. M L XL

6 RAGBRAI XXXVII JERSEY (Jerseys by Primal Wear) Please indicate jersey size below. \$50 \$ _____

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHEST SIZES:	SM (35-37)	M (38-40)	L (40-42)	XL (42-44)	XXL (44-46)	XXXL (46-48)

7 TOTAL AMOUNT ENCLOSED (Please check your math to avoid delays)

\$

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EACH ENTRANT MUST SIGN AN INDIVIDUAL WAIVER. FAXED WAIVERS WILL NOT BE ACCEPTED.

This form may be photocopied; however, faxed signed waivers will not be accepted.

I, the undersigned, know and understand that RAGBRAI and its related events involve potentially hazardous or dangerous activities and conditions. I attend RAGBRAI and all related events out of my own free will and choice. In choosing to attend RAGBRAI and any related events, I fully accept and assume all risks, whether before, during or after RAGBRAI and its related events. These include, without limitation, physical injury, mental injury, emotional distress, trauma, sickness, illness, death, contact with other participants, equipment failure, inadequate safety equipment, the effects of weather including extreme temperature or conditions, traffic, contact with motor vehicles of all types and descriptions, collision with other riders or fixed objects, the conditions of and/or design and other defects in the road and facilities, camping, negligence of others and participating in events, including those along the route. I am aware that the risk of injury or death is always present in biking and RAGBRAI's attendant events and that this risk cannot be eliminated by RAGBRAI organizers, sponsors, and the government and private entities that host or assist in the RAGBRAI events. I know and accept that biking and road accidents may result from the failure for any reason (including negligence) of RAGBRAI organizers, sponsors, and the government and private entities that host or assist in the RAGBRAI events to correctly determine the conditions and safety of the road, surface, route or weather or to predict where or when an accident might occur. All risks are known appreciated and assumed by me and I waive any and all specific notice of the existence of them and further waive the obligation, if any, that any other person or entity has to advise or warn me of them. I assume liability for and agree to pay my own medical and emergency expenses in the event of injury, illness, or other incapacity regardless of whether I authorized such expenses. I authorize the use and release of personal and medical information in connection with any medical services provided to me.

I realize that RAGBRAI events require physical conditioning. I represent that I am in sound medical condition capable of participating in the RAGBRAI events without risk to myself or others. I have no medical impediment that would endanger others or me. I understand that a situation may arise during RAGBRAI and related events that may be beyond the control of the sponsors, promoters, organizers, government and private entities that host or assist in the RAGBRAI events or others, or may arise from negligence by them, and accept and assume all risks of participation and/or attendance. I will be solely responsible for the condition and adequacy of my bicycle, safety gear and equipment. I will ride safely within the limits of my own abilities, my equipment and the riding conditions and in a manner that does not endanger others or me.

Knowing these facts and in consideration of my entry acceptance, admission to and/or participation in RAGBRAI and its related events, I for myself, spouse, children, heirs, next of kin, assigns and anyone acting on my behalf, release, waive, discharge, covenant not to sue and agree to hold The Des Moines Register and Tribune Company and its parent company, subsidiaries and affiliated entities; RAGBRAI sponsors and participating clubs, communities and organizations; RAGBRAI officials, emergency and support personnel, volunteers and their representatives; official Friends of RAGBRAI; persons and entities

that provide event recommendations, advice or services relating to matters such as route selection, design or maintenance, risk management, safety and first aid; all property owners, law enforcement agencies and governmental or public entities, including without limitation the State of Iowa, its counties, cities and special districts; and the officers, directors, employees, representatives, agents, and successors of all of the above, harmless from any and all claims, demands and actions of any and every kind I have, may have or may hereafter accrue against the released parties directly or indirectly arising out of or relating in any respect to my attending or participating in RAGBRAI and/or any related events. My waiver and release of all claims, demands, actions and liabilities shall include without limitation, any personal injury, accident, illness or death and any property damage or loss that may be: (a) caused by any act, or failure to act, by the above-identified persons and entities, including without limitation, their negligence, errors, omissions, failure to enforce rules, and conditions of the routes and/or event premises, and/or (b) sustained by me before, during or after RAGBRAI and its related events. I acknowledge that I am signing this agreement freely and voluntarily, and intend by my signature for this to be a complete and unconditional release of all liability to the greatest extent allowed by law. I further acknowledge that no representations, promises, statements or inducements have been made to me other than as set forth in this document. I will abide by all RAGBRAI rules and regulations. I understand that my name, address, photograph, voice and/or likeness may be used in promotional or advertising materials of or by The Des Moines Register and Tribune Company, and its licensees. I consent to such uses and waive any rights of privacy or publicity I may have in connection with those uses. I also waive any privacy rights that may result from disclosure of information about me, including without limitation, in connection with provision of any medical services by RAGBRAI sponsors and organizations. I further agree to indemnify and hold the parties released above harmless from any and all losses, damages, injuries, claims and expenses, including attorneys' fees, arising from or relating in any respect to my attendance and/or participation in RAGBRAI and/or its related events or my breach of this agreement. If I am a minor, my parent or guardian also is signing on my behalf. We both agree to be bound by the terms of this agreement, waiver and release. I also waive all spousal claims relating to RAGBRAI, if any, that I hold or that may arise through me. I agree that no modifications or amendments to the standard Entry Form and this waiver and release shall be binding unless they are accepted in a separate writing signed by the President of The Des Moines Register and Tribune Company.

If special arrangements are required for individuals with disabilities to complete and submit this form or if translation to another language is required, please contact T. J. Juskiewicz at The Des Moines Register, 715 Locust Street, PO Box 622, Des Moines, Iowa 50306-0622 no later than March 6, 2009. The Register will take those steps reasonably available to accommodate your request.

Si arreglos especiales son requeridos por personas incapacitadas para completar o someter este documento o si se requiere su traduccion a otra lengua, notifiquese T. J. Juskiewicz en El Des Moines Register, 715 Locust Street, PO Box 622, Des Moines, Iowa, 50306-0622 antes de 6 del Marzo, 2009. El Register tomara las medidas razonablemente disponibles para acomodar su solicitud.

I (the previously-named entrant on the Individual Entry Form) HAVE READ THIS AGREEMENT, WAIVER AND RELEASE, UNDERSTAND IT AND VOLUNTARILY AGREE TO AND ACCEPT ITS TERMS. I UNDERSTAND I AM GIVING UP SUBSTANTIAL RIGHTS. (SUBMIT SIGNED ORIGINAL; FAXED OR PHOTOCOPIED SIGNATURE WILL NOT BE ACCEPTED.)

Printed Name

Date Signed

Unique ID

Signature of Participant

Signature of Parent If Participant Is Under 18

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GROUP SUMMARY - PAGE 4

Complete this page only if you are the Group Contact for a group entering more than one person.

RAGBRAI® XXXVII
 JULY 19-25, 2009
 The Des Moines Register

Wristbands and jerseys will be sent to the Group Contact in June.

GROUP NAME

1 RIDERS / NON-RIDERS

<input type="checkbox"/>	NUMBER OF WEEK-LONG RIDERS	X	\$140	\$ <input style="width: 60px;" type="text"/>
<input type="checkbox"/>	NUMBER OF WEEK-LONG NON-RIDERS	X	\$35	\$ <input style="width: 60px;" type="text"/>
<input type="checkbox"/>	NUMBER OF DAILY WRISTBANDS	X	\$25	\$ <input style="width: 60px;" type="text"/>

2 VEHICLE PASSES REQUESTED: The driver and passengers in the vehicle, who are not entering as riders, must enter as non-riders and pay non-rider fees. **ONLY Groups of three or more (combination of riders and non-riders) are eligible to apply for a vehicle pass.**

<input type="checkbox"/>	NUMBER OF VEHICLE PASSES REQUESTED (LIMIT OF 3)	X	\$35	\$ <input style="width: 60px;" type="text"/>
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REQUIRED VEHICLE PASS INFORMATION: "Other Vehicle" would include any vehicle that is not a large truck, bus or RV/motor home including SUVs, vans, cars, pick-up trucks, etc. **All drivers listed MUST BE REGISTERED WITH YOUR GROUP.**

VEHICLE TYPE	DRIVER'S FIRST NAME	DRIVER'S LAST NAME	DRIVER'S BIRTH DATE
<input type="checkbox"/> Large Truck <input type="checkbox"/> Bus/RV <input type="checkbox"/> Other Vehicle			
<input type="checkbox"/> Large Truck <input type="checkbox"/> Bus/RV <input type="checkbox"/> Other Vehicle			
<input type="checkbox"/> Large Truck <input type="checkbox"/> Bus/RV <input type="checkbox"/> Other Vehicle			

3 PREMIUM AND BASIC SOUVENIR PACKS

NUMBER OF PREMIUM SOUVENIR PACKS	_____	X	\$40	\$ <input style="width: 60px;" type="text"/>
Please indicate the QUANTITY for each size in appropriate box	<input type="checkbox"/> M	<input type="checkbox"/> L	<input type="checkbox"/> XL	

NUMBER OF BASIC SOUVENIR PACKS	_____	X	\$25	\$ <input style="width: 60px;" type="text"/>
Please indicate the QUANTITY for each size in appropriate box	<input type="checkbox"/> M	<input type="checkbox"/> L	<input type="checkbox"/> XL	

4 TOTAL NUMBER OF RAGBRAI XXXVII JERSEYS

NUMBER OF RAGBRAI XXXVII JERSEYS	_____	X	\$50	\$ <input style="width: 60px;" type="text"/>		
Please indicate the QUANTITY for each size in appropriate box.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHEST SIZES:	SM (35-37)	M (38-40)	L (40-42)	XL (42-44)	XXL (44-46)	XXXL (46-48)

5 TOTAL AMOUNT ENCLOSED (Please check your math to avoid delays)

\$

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