



Parental Consent Form

Rider's name in full: _____	Date of Birth : / /
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Parent or Legal Guardian
I, (name) _____
of (full address) _____

Being the parent or legal guardian of the above rider I understand and agree that my son/daughter participates in events promoted by Tour de Manc Ltd as non-competitive cycling events, entirely at his/her own risk, unless under 16 in which case clause c. below applies. I have considered and understand the nature of such events and have discussed them with my son/daughter.

I am confirm and am happy to accept that:

(a) unless subject to c below, my son/daughter is sufficiently responsible and competent to assume full and entire responsibility for his/her own safety whilst engaged in non-competitive events organised by Tour de Manc Ltd following British Cycling's non-competitive cycling guidelines.

(b) riders over 16 years of age are permitted to participate as individuals in this event and must therefore assume full and entire responsibility for their own safety in relation to other traffic. I understand and have emphasised to my son/daughter that the function of marshals in such events is to do no more than indicate the direction the rider should take and that the responsibility for safety whilst negotiating corners, turns and other hazards must rest with the rider alone.

(c) riders below the age of 16 will be accompanied throughout the event by myself (or an adult assigned by me, acting as my agent) and I or the assigned adult is willing to take full responsibility for the safety of my son/daughter.

(d) I have impressed upon my son/daughter that all participants in events on the open road must observe the law of the land relating to road travel.

(e) my son/daughter shall participate in such events without any liability whatsoever on the part of the event organiser, Tour de Manc Limited, or organisation affiliated thereto or their officials or members in respect of any injury, loss or damage suffered by him/her, provided that this does not exclude the liability of any such party for death or personal injury arising from that party's negligence.

(e) my son/daughter does not have any disability or medical condition, physical or mental, which could affect his/her ability to ride safely in the event entered. I understand that I must notify organisers of the Tour de Manc at once if at any time my son/daughter becomes subject to a disability or medical condition, physical or mental, which could affect his/her ability to ride safely in the event entered.

Signed (Parent or Legal Guardian): _____	Date : / /
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