

TEAM ALAMEDA RIDE SHEET

DATE _____
 RIDE ROUTE _____
 POSTED RATING HILLS (1-5) ___ PACE (A-D) ___ MILES _____

RIDE LEADER/CELL _____
 COLEADER/CELL _____
 ACTUAL MOVING SPEED _____ mph OR MILES _____ AND
 MOVING TIME _____

Ride Check List	Safety Check List	Safety Check list (cont.)
Are all riders signed in?	Call out all hazards	Call out when passing on left - Don't pass on right
Any guests today? 1 ride maximum	Review hand signals	Equipment check - Helmet, water, bikes in good shape
Describe route and regroup points	Single-file	Avoid shouting out "Clear" - Each person should be watching
Describe Rating, Distance and ETA. Everyone comfortable?	Watch for doors	
Drop or No Drop. Off the front means on your own	Don't run stop lights and signs	

Team Alameda Members

	Print name	Initials	Cell #	Emerg #		Print name	Initials	Cell #	Emerg #
1					13				
2					14				
3					15				
4					16				
5					17				
6					18				
7					19				
8					20				
9					21				
10					22				
11					23				
12					24				

Guest Riders

Please read and sign this waiver. "In consideration for my being permitted to participate in this Team Alameda event, I, the undersigned, for myself, my heirs, executors, administrators, and assigns, waive, release, and discharge all claims for damages resulting in death, personal injury, or property damage which I may suffer or which may occur to me as a result of my participation herein. I understand this release is intended to discharge and release forever Team Alameda, its members, officers, directors, agents and representatives, from and against any liability arising out of or connected in any way with my participation in this club event, even if such liability may arise out of negligence or carelessness on the part of any person or entity identified above."

	Print name and email or home address	Initials	Cell#	Emerg. #		Print name and email or home address	Initials	Cell #	Emerg. #
G1					G3				
G2					G4				

Mail or drop completed form to Team Alameda, 1009 Versailles Ave, Alameda CA 94501. Or send image to jdsyachts@att.net or 510-919-0001.
 Form revised 11/2016