



Assisting Holocaust Survivors in Need



Sunday - August 22nd, 2021

Team Blue Card Bike Tour Application

To qualify for Team Blue Card, please fill out and return the application at your earliest convenience.

Please note that application does not guarantee acceptance.

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First Name

Middle

Last Name

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Address

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City

State

Zip

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Email

Cell

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DOB

Gender

Shirt Size

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Occupation

Employer

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Completed applications should be emailed to Rechan@bluecardfund.org, faxed to 212-594-6881 or mailed to 171 Madison Avenue, Suite 1405, New York, NY 10016.

Emergency Contact

Relationship

Phone

Please list names of endurance events you have participated in and their locations:

Text here:

Do you have a personal connection to the Holocaust?

Text here:

Please indicate how much you are committing to raise:

How do you plan to raise the funds? Text here:

How did you hear about The Blue Card?

Newspaper TV Social Media

Family Friends Co-workers

Other: Text here:

Financials:

As per the organizers of Bike New York, the fundraising minimum is \$500 per entry. As a charity with a mission to provide financial support to needy Holocaust survivors, we ask our runners to provide their credit card information in the event that they will not be able to raise the required \$500 as part of the fundraising commitment by the deadline. If the required amount is not raised, we may charge the card for the difference.

Credit Card: Amex Visa MasterCard Discover

Card Number

CSC (Security) Number

Expiration: Month

Year

Billing Address: Text here:

City

State

Zip

Card Holder's Signature

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Date

Medical Waiver

You understand that participation in the 2021 Bike New York bicycle tour as a member of team Blue Card, including pre-event training and related event activities (collectively referred to as the "Event") is a potentially hazardous activity. You agree not to participate unless you are medically able and properly trained. You are voluntarily entering and assume all risks associated with participating in the Event, including, but not limited to, falls, spills, contact with vehicles, other participants, spectators or others in the area, effects of weather, including cold or extreme heat and/or humidity, traffic and the conditions of the roads, all risks being known and appreciated by you. You grant the Medical Director of the Event and his designee access to your medical records and physicians, as well as other information, relating to medical care that may be administered to you as a result of your participation in the Event.

Having read this Waiver and knowing these facts, you, for yourself, and anyone entitled to act on your behalf, waive and release The Blue Card, the Bike New York organizers, the City of New York and its agencies, all Sponsors of the Event and of the Team, and each of the respective representatives and successors, officers, directors, members, agents and employees of the foregoing, from all present and future claims and liabilities of any kind, known or unknown, arising out of your participation as a member of Team The Blue Card, even though that liability may arise out of ordinary negligence or fault on the part of persons named in this Waiver.

Signature

Date

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Media Release

You grant permission to the organizers of this Event and to The Blue Card, its agents, contractors or representatives, to use, or authorize others to use, any photographs, motion pictures, recordings, or any other record of your participation in this Event and as a member of Team Blue Card for any legitimate purposes without remuneration.

Would you be interested in speaking with the media about your experience?

Click or tap here to enter text.

Signature

Date

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