



# 17TH ANNUAL FRISCO FEST

## TOUR DE' SAN FRANCISCO

*Cycling Fun In St. John / St. James Parishes*

**Saturday, March 7, 2020**

**San Francisco Plantation, Garyville LA**

### Course: Prayers and Plantations

Historic River Road Course passing numerous Churches and Plantations  
25 mile and 50 mile courses

## DEADLINE FOR EARLY BIRD APPLICATION - FEBRUARY 1, 2020

Check In Time: 7:30 a.m. / Start: 8:00 a.m. Lunch will be served at 11:00 a.m.

Riders Fee: Early Bird - \$25.00 for 25 or 50 mile bike ride — \$30.00 after February 8th

Includes: Dry Zone Fitted T- Shirts, drinks, meal and admission to grounds

**Fully Catered! - Police Escorts! - Free Admission to browse around the Craft Show!**

Name (*first, last*) \_\_\_\_\_

Phone Number \_\_\_\_\_

**Emergency Contact with Phone Number:** \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Shirt Size: Small Medium Large X-Large  
(Circle One)

Email Address \_\_\_\_\_

## You have two options for registration & payment:

### Online Payment:

Go to <http://www.sanfranciscoplantation.org> and click on the Frisco Fest tab to register and pay online via paypal.

### Mailed Payment:

Send completed application with full payment to:  
San Francisco Plantation  
c/o Kim Fontenot  
Post Office Box 950  
Garyville, LA 70051

### For More Information Call:

**Plantation Office: (985) 535-2341**

Visit our webpage [www.sanfranciscoplantation.org](http://www.sanfranciscoplantation.org) for map.

I agree that it is my responsibility to obey all applicable regulations, rules, and laws while participating in this event. I hereby waive, release, and discharge any and all claims for damages, for death, personal injury or property damage which I may have, or which may hereafter accrue to me as a result of my participation in this bicycle tour conducted by the San Francisco Plantation. This release is intended to discharge in advance any claims for damage against the San Francisco Plantation, the city of Garyville, the St. John the Baptist Parish or St. James Parish Sheriff's Office, Acadian Ambulance Service, any club member, employee, agent or entity acting on their behalf from and against all liabilities arising out of or connected in any way with my participation in the bicycle tour or carelessness on the part of the persons or entities mentioned above. I further understand that serious accidents may occur during bicycle tours and as a result, participants in bicycle tours may sustain mortal or serious injuries and/or property damage. Knowing the risk of bicycle riding, nevertheless, I hereby assume those risks and to release and hold harmless all the persons or entities mentioned above who might otherwise be liable to me, or my heirs or assigns for damages. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns.

Rider's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*If you belong to a Bicycle Club, please complete the information requested below:*

Club Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**For Official Use Only:**

**Date Received:**

**Amount Received:**