



Promoting the beauty of Lebanon County through cycling

Saturday, June 13, 2026

Presented by the Lebanon Valley Conservancy, Community Health Council of Lebanon County and Lebanon Valley Bike Club

The Tour de Lebanon Valley is a twist on a classic Lebanon County ride. It includes a beautiful metric century (64 miles), a rolling mid-distance (30 mi) and a fun filled family ride (6 miles). Each route winds through rolling countryside, beautiful farmlands, young forests, and past historic sites.

The metric century and mid-distance routes cover rolling terrain with moderate elevation change. There will be three rest stops on the metric century and one on the mid-distance ride. The first 100 registrants for the family ride will receive a free entry to the historic Cornwall Furnace (good for ride day, or any day!).

Cost

\$55 – Mid-distance and Metric Century (on or before May 31st)

\$65 – Mid-distance and Metric Century (May 31st to Ride Day)

\$70 – Mid-distance and Metric Century “Day of” riders

\$10 – Family ride (per rider)

MORE INFORMATION (over) →

PLEASE PRINT CLEARLY: Email or phone contact required

____ Date of Birth: _____ Gender: M or F (please circle one)
(First Name) (Last Name)

Address: _____ Apt. # _____ (City) (State) (Zip Code)
(Street)

Email: _____ Phone No.: _____

Registration Total \$ _____

Emergency Contact and Phone: _____

Event (circle) Metric (62) Century Mid-Distance ride Family ride

ONLINE REGISTRATION IS AVAILABLE ON BIKEREG.COM

Did you sign BOTH SIDES of this sheet? Please SIGN the WAIVER on the back of this form!



Event Details

Start: Lebanon Valley Expo Center, 80 Rocherty Road, Lebanon, PA 17042

Metric Century rolling start: 6:30 am – 8:00 am. 62-mile riders must start by 8:00 am.

Mid-distance rolling start: 8:00am-9:00am. Mid-Distance riders must start before 9:00am

Family ride rolling start: 9:00am-10pm.

Metric century and mid-distance riders will receive wristbands at the check in. You must wear the wristband to participate. Online registration ends Wednesday, June 10th at 5:00pm. Ride Day registrations will be accepted on Friday night or Saturday morning (CASH, CHECK or VENMO ONLY). Made payable to the Community Health Council.

More Details

Helmets and waivers are REQUIRED. Each route is well marked. The ride is fully supported with frequent rest stops and mechanical support. All rules of the road must be followed. On-site parking at the Lebanon Expo Center. Children 16 and under must be accompanied by an adult rider. PLEASE NOTE: The Tour de Lebanon Valley takes place rain or shine.

**Waiver: IN CONSIDERATION of being permitted to participate in any way in the Lebanon Valley Bicycle Coalition, Community Health Council of Lebanon County and Lebanon Valley Conservancy/Tour de Lebanon Valley ("TdLV") bicycle activity ("Activity") I, for myself, my personal representatives, assigns, heirs, and next of kin: 1. ACKNOWLEDGE, agree, and represent that I understand the nature of the TdLV and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further acknowledge that the Activity will be conducted over public roads and facilities open to the public during the Activity and upon which the hazards of traveling are to be expected. I further agree and warrant that if, at any time, I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. 2. FULLY UNDERSTAND that (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH ("Risks"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the conditions in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I may incur as a result of my participation in the Activity. 3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the TdLV, the Lebanon Valley Bicycle Coalition, the Community Health Council of Lebanon County, and/or the Lebanon Valley Conservancy, its respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS. And, I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

I AM 18 YEARS OF AGE OR OLDER, HAVE READ AND UNDERSTAND THE TERMS OF THIS AGREEMENT, UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING THIS AGREEMENT, HAVE SIGNED IT VOLUNTARILY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW. I AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT. End waiver ***

I HAVE READ AND UNDERSTAND THIS WAIVER: Signature: _____ Date: _____

(COMPLETE FOR participants under THE age OF 18) I, the minor's parent and/or legal guardian, understand the nature of bicycling activities and the minor's experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activity. I hereby release, discharge, covenant not to sue, and agree to indemnify and save and hold harmless each of the releasees from all liability, claims, demands, losses, or damages on the minor's account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the releasees named above, I will indemnify, save, and hold harmless each of the releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any may incur as the result of any such claim.

Minor's Name (PRINTED): _____ Birth Date of MINOR: _____ SIGNATURE OF MINOR PARTICIPANT: _____

PARENT/GUARDIAN NAME (PRINTED): _____ PARENT/GUARDIAN SIGNATURE: _____