



CYCLE FOR INDEPENDENCE

May 19, 2018

OFFICIAL ENTRY FORM

Treasure Valley Chapter National Federation of the Blind

Each rider must fill out a separate entry form.

Helmets Required



Last Name: _____ First Name: _____

Address: _____ City: _____ State: _____ Zip: _____

E-mail: _____ Phone: _____ Age: _____

Emergency Contact:

Name: _____ Phone: _____ Relationship: _____

Only riders who pre-register on or before May 15, 2018 are guaranteed a free pair of bike socks!

Route Entry Fees

- Metric Century \$40.00
- 25-Mile \$40.00
- 10-Mile \$30.00

If in Team

- \$35.00
- \$35.00
- \$25.00

Check-In

- 7-7:45 am
- 8-8:45 am
- 8:45-9:15 am

Start

- 8 am
- 9 am
- 9:30 am

Students: \$20.00 any route (**Under 16 years must be accompanied** by responsible adult on route) **Students, please remember to mark which ride you choose.**

Boy/Girl Scout Teams: \$15.00 any route (Must have at least 5 members and be accompanied by adult.)

TEAMS MUST PRE-REGISTER A team consists of at least 5 riders. Members don't have to ride the same route. Make it a party!

To pre-register, this form must be received on or before **May 15, 2018.**

Team/Company Name: _____

Team Contact/Captain: _____ Phone: _____

Mail this form with check or money order payable to:

Amount Enclosed: \$_____

Allan Schneider

Treasure Valley Chapter, NFBI

3820 N Willowbar Ln

Garden City, ID 83714

Or Email to aaschneider@hotmail.com

ONLINE REGISTRATION AVAILABLE AT WWW.CYCLEFORINDEPENDENCE.ORG

Waiver: I hereby represent that I am in good physical condition for this ride. I understand that this is a noncompetitive ride and not a race. A helmet is required to participate, and I agree to wear a helmet designed for bicycle riding. By signing this form, I waive any claims of action I may have against the Treasure Valley Chapter, National Federation of the Blind of Idaho, the state of Idaho, the City of Boise, and Ada/Canyon counties from all liability arising out of injury to persons or property, and any loss, damages or expenses arising out of my participation in the Cycle for Independence. I also agree to wear identification provided by Cycle for Independence during the ride.

Signature: _____ Date: _____

Parent or Guardian Signature: _____ Date: _____

If rider is under 18 years of age parent or guardian must also sign.

Thank you for supporting The Blind of Idaho!