



# CYCLE FOR INDEPENDENCE

May 18, 2019

## 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 13, 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.**

**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 13, 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](http://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!**