

Эπісе	use o	nıy		

SADDLEBACK SPRING CLASSIC GRAN FONDO PEDALING TO CURE PEDIATRIC CANCER MARCH 25TH, 2017 | IRVINE VALLEY COLLEGE

PEDALING TO CURE PEDIATRIC CANCER

			On	e en	try	er f	orm	. Th	is fo	rm n	nay	be p	hoto	copie	d. Please print I	egibly a	ınd US	E BLUE	OR BL	ACK II	NK ONLY	′ .
FIRST NAME															ENTRY FEES	Early Price	Until 10/1	Until 11/25	Until 12/31	Until 2/21	on Event Day	
LAST		i		i			\exists		$\overline{+}$			İ		_	100 mile	\$75	\$85	\$95	\$105	\$115	\$125	\$
NAME							\perp								50 mile	\$50	\$55	\$60	\$65	\$70	\$75	\$
AGE ON RACE DAY			DATE OF BIRTH			/[<i>'</i>		SEX	: 🔲 N	/I 🗌	F	35 mile	\$40	\$45	\$50	\$55	\$60	\$65	\$
			DINIT			J L									15 mile	\$30	\$32	\$35	\$38	\$42	\$45	\$
STREET ADDRESS															Kids Ride	\$10	\$12	\$15	\$18	\$20	\$23	\$
CITY							$\frac{1}{1}$								Upgrade to Bri			ı, <mark>5K, 10K</mark> □ 5K		ay Marc	h 26th) \$45	\$
CTATE			710			Ш	_	_					Ш		Jersey						\$65	\$
STATE			ZIP												Tandem Upgra	ade					\$35	\$
DAY PHONE				-			-[TOTAL AMOUNT	ENCLOS	ED				\$_	
EMAIL ADDRESS															□Visa □ MC	CAm	ı Ex					
r-shirt siz 2ND RI			□ M : n ∩			□ XL NN		⊒ XX	L [] Chil	d M		Child	S	Credit Card #_ Exp. Date							
FIRST NAME															Signature							
LAST NAME															EVENT DAY EM	ERGENC	Y CONT	4CT	1	\		
AGE ON RACE DAY			DATE OF BIRTH	:]/[<u> </u>		SEX	: 🗌 N	/ <u> </u>	F	Name (Please Print) WAIVER: I, the undexertion and with thi		understand	d that ther		Phone s associa	ted with str	enuous physi
EMAIL ADDRESS															exertion and with thi and the condition of hydrate the body. In Classic Gran Fondo t with this event and I	f the partici consideration from now o	ipant, veh on of your n referred	icles, othe accepting to as the '	r participa this entry to 'Event", I h	ints and f to participa hereby as	failure to ad ate in the Sa ssume ALL R	lequately fuel Iddleback Spr IISKS associa
T-Shirt Siz	e 🗆] S	□М		L	⊐XL] XX] Chil	d M		Child	S	and organizers (incl Orange and OC Park Viejo, City of Rancho Point, and their appo	luding race is and the S Santa Marg pinted board	directors State of Ca Jarita, City Is, official), Pediatrio alifornia, Ci of San Jua s, officers,	c Cancer F ity of Irvine in Capistral employees	Research e, City of ino, City o s, agents,	Foundation Lake Forest f San Cleme , volunteers	, the County , City of Miss nte, City of Da and represen
ENTRY FE RACES HI						SLE A	ND I	NON	-TRAI	NSFE	RAB	LE.			portions of an Eveni participants and rep representatives and tors, vendors, athlete Parties"), from any actions of any kind w tion in this event. photographs, video	t takes place presentative successors es, all other and all clai	ce, and the s of all of , all Event persons or ms for da	e officers, f the above sponsors, entities in	directors, e, race off Event sta volved with death ne	employe icials, vo aff, admin an Event ersonal in	es, agents, lunteers, all listrators, of t, (collective	, insurers, ot sponsors, th ficials, contr ly, the "Releas perty damage
(Make ch MAIL TO:	ecks	paya	able to	Ren	iega	de Ra	acinç	g)							actions of any kind w tion in this event. photographs, video	which may h Further, I tapes, moti	ereafter a hereby gr on picture	ccrue to me ant full pe s, recordir	or any othermission to	ner persoi to any ar other re	n as a result nd all forego cord of this	of my partici ping to use a "Event" for a

photographs, video tapes, motion pictures, recordings or any other record of this "Event" for any legitimate purpose such as but not limited to advertising, race brochures, posters and other promotional material.

promotional material.

IF THE PARTICIPANT IS UNDER 18 YEARS OLD: This is to certify that a legal guardian or parent is giving permission for a participant under 18. The parent or legal guardian agrees to the fore mentioned considerations and assumes the risks of the under 18 years old participant in the "Event" and related activities.

RETEGRATE	RRIE	SERIES
WWW.RENEGAD	JERACES	ERIES.COM

22600-C Lambert Street, Suite 910, Lake Forest, CA 92630

949-975-1812 PHONE • 949-975-1814 FAX

Printed Name of Participant	_ Date
Signature of Participant or Guardian	Date