

OWEN SOUND CYCLING CLUB  
PRESENTS

# WHEMMY'S ENDURO 2010

**Sunday, Sept 26, 2010 @ 1pm.  
SAWMILL TRAILS, HEPWORTH**

SOLO OR 3-PERSON TEAM CROSS-COUNTRY MTB RACE

RACE DAY REGISTRATION ON SITE 11am TO 12:30 PM

PRIZES FOR 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> PLACE IN EACH CATEGORY AND AGE GROUP  
DRAW PRIZES AVAILABLE COURTESY OF **BIKEFACE**

LAP LENGTH: 4KM TO 5KM (15-25 MINUTES)

**ENTRY FEE:** \$6.00 PER ENTRANT IF A MEMBER  
\$18.00 PER TEAM

**NOTE\* FOR INSURANCE REASONS, YOU MUST BE A MEMBER OF THE OWEN SOUND CYCLING CLUB.  
(Membership applications available from the Owen Sound Cycling Club website or at registration)**

**RELEASE, WAIVER AND INDEMINITY:** Read carefully before signing.

I understand that an approved cycling helmet must be worn during the bicycle portion of the race. In consideration of your accepting my event application, I for myself, my heirs and assigns do hereby release and forever discharge the Owen Sound Cycling Club, concerned land owners, municipalities, sponsors, organizers and all other parties of and from any claim whatsoever arising out of my or my family's participation, whether as a spectator, participant, competitor or otherwise, at any time and notwithstanding that same may have been contributed by or occasioned by the negligence of the aforesaid. I further undertake to hold and save harmless and agree to indemnify all the aforesaid against any and all liability incurred by any or all of them arising as a result of or in any way connected with my participation in the event. I realize that there are inherent risks to any sporting activity, including mountain biking, and hereby assume those risks. By submitting this entry I acknowledge having read, understood and agreed to the above waiver, release and indemnity. I warrant that I am physically fit to participate in this event, and that all my equipment is mechanically fit and is suitable for use in this event.

**Team Name:** (If Applicable) \_\_\_\_\_

<b>1<sup>st</sup> Team Member Name:</b>	<b>Signature:</b>
<b>Emergency Contact:</b>	<b>Emergency Phone:</b>

<b>2<sup>nd</sup> Team Member Name:</b>	<b>Signature:</b>
<b>Emergency Contact:</b>	<b>Emergency Phone:</b>

<b>3<sup>rd</sup> Team Member Name:</b>	<b>Signature:</b>
<b>Emergency Contact:</b>	<b>Emergency Phone:</b>

**RACE CATEGORIES (Put an X in the appropriate box) (Age as of December 31, 2010)**

Age	Male Solo	Female Solo	Team Age	Male Team	Female Team	Mixed Team
<18			Under 45			
18-34			45-79			
35-49			80-149			
50+			Over 150			
<b>Family (Oldest age must be double the youngest age.)</b>						