



Adventure Race
Registration & Team Data
Race Date – February 27, 2010
Pre-registration through 2/7/2010
Late-registration through 2/17/2010



Team Name: _____

Race Category (circle which applies) **MASTERS COED ALL MALE ALL FEMALE**
(Masters: 3per.>120yrs, 2per>80, 1per>40: choose category too)

Adult (18+yrs)

____ Solo team \$80 after 2/7 add \$10
____ 2 person team \$130 after 2/7 add \$20
____ 3 person team \$190 after 2/7 add \$30

*To ensure these prices you must be on the pre-registered list:
Complete this form in its entirety, including fee calculation. There
will not be a transfer of money until approvals are complete.

Trail Blazer Club discount 10%: Member ID# _____

Please Print Clearly

Team Captain's Name 1 _____ M _____ F _____ Shirt Size _____

Date of Birth ____/____/____ Age (on race day) _____ Phone (____) _____ - _____

Address _____ City _____ ST _____ Zip _____

E-mail Address (all race info will go to this address ONLY) _____

Team Member's Name 2 _____ M _____ F _____ Shirt Size _____

Date of Birth ____/____/____ Age (on race day) _____ Phone (____) _____ - _____

Address _____ City _____ ST _____ Zip _____

Team Member's Name 3 _____ M _____ F _____ Shirt Size _____

Date of Birth ____/____/____ Age (on race day) _____ Phone (____) _____ - _____

Address _____ City _____ ST _____ Zip _____

Registration Fee Calculation

- Our team will need a canoe (Description - basic family flat water touring canoe)
- We will need paddles. Number of paddles needed _____
- We will need PFD (Personal Floatation Device) – number of PFDs needed _____
- There will be a \$50 fee for canoe/accessory and a \$200 refundable security deposit (check due at check-in).
- Has your team completed the Race Waiver/Liability form for each participant? Yes _____ No _____
(Registration is not complete without attached Team Members Signing Waiver Form)

Sub-Total \$ _____ **Canoe** (if applicable) **\$** _____ **Trail Blazer Discount \$** _____ **TOTAL \$** _____

Type of Card (Circle one) Visa MasterCard **Name on Card** _____

Credit Card # ____/____/____/____ **Expiration Date** ____/____

Card Holder's Signature _____ Date _____

Signature of Team Captain _____ Date _____

Signature of Teammate 2 _____ Date _____

Signature of Teammate 3 _____ Date _____