

Tour de Poway Registration & Order Form

Sunday, October 3, 2010

Print this form and mail or fax back, a signature is required on waiver below.

Name _____

Address _____

City _____ State _____ Zip _____ Phone _____

Email _____

1) **100 mile**(Century), **62 mile**(Metric Century) & **50 mile (\$50)**.....\$ _____

2) **26 mile and 18 mile** registration fee **(\$40)**..... \$ _____

3) **After September 24th add (\$15) to registration fee**.....\$ _____

4) **Cycling Jersey (\$70)**.....\$ _____

High quality primal wear, unisex cut, 3/4 zipper, 3 pockets.(Women may want to order one size smaller)

circle size XS-----S-----M-----L-----XL-----XXL-----XXXL

5) **T-shirt (\$12) ADD \$3 for XXL**.....\$ _____

circle size S-----M-----L-----XL-----XXL

6) **Barbeque Ticket (\$12)**.....\$ _____

7) **TOTAL (DO NOT SEND CASH)** \$ _____

Pay by credit card or check payable to, "TOUR DE POWAY" (NO REFUNDS)

Credit Card # _____ Exp Date _____ CVC _____

TOUR DE POWAY, P.O. BOX 1446, POWAY, CA. 92074 (Fax # 858-683-2005)

Waiver and Release: In consideration of your acceptance of this entry, I hereby, for myself, my heirs, my executors and administrators waive any and all rights and claims for damages I may have against Cycling Promotions West, Sponsors, coordinating groups, and any individuals associated with this event, their representatives, successors and assigns, and will hold them harmless for any and all injuries and/or damages suffered in connection with this event. I have been warned that bicycling is a dangerous sport and that I must be in good health to participate in this event. I must obey all traffic laws and it has been recommended to me that I should wear a helmet while participating in this event. In filling out this form I acknowledge I have read and fully understand my own liability and do accept the restrictions.

X _____ Age _____ Date _____

Signature of participant (or signature of parent/guardian if under 18 years old)