

THIS RACE CLASS IS STRICTLY FOR TRUE BEGINNERS



Plate # _____

Circle your class (26.Men) (27.Women) (28.Coed)

Today's Date: ____/____/____

Team Name: _____

1.) First Name: _____ Last Name: _____

Address: _____ City _____ Zip _____

E-mail: _____ @ _____ Ph#: _____

Emergency Contact: _____ Ph. #: _____

2.) First Name: _____ Last Name: _____

Address: _____ City _____ Zip _____

E-mail: _____ @ _____ Ph#: _____

Emergency Contact: _____ Ph. #: _____

3.) First Name: _____ Last Name: _____

Address: _____ City _____ Zip _____

E-mail: _____ @ _____ Ph#: _____

Emergency Contact: _____ Ph. #: _____

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