

Beautiful Scenery... Tranquil Surroundings



Presents the 17th Annual

Rails to Trails Bike Ride!

Sunday, October 2, 2011
on the WITHLACOOCHEE
STATE TRAIL!

Michelob ULTRA

START TIME: 7:00AM - 9:00AM (no mass start) Rain or Shine.

LOCATION: The ride will begin at the North Apopka Avenue Trail Crossing at 315 N Apopka Ave. in Inverness. Continental breakfast will be available and lunch is from 11AM to 2PM.

T-SHIRTS: Riders who pre-register on or before September 11, 2011 will receive a quality shirt with the 17th Annual Ride theme on the front. Those who register after September 11, 2011 or the day of the ride are not guaranteed a t-shirt. If no size is selected below, you will receive a large.

DISTANCE: The Withlacoochee State Trail is a paved, 46 mile long converted railroad track. You can determine your own ride distance. A fun ride to Floral City and back will be 14 miles. A ride to the North End and back is 32 miles, combined with a ride to Istachatta Highway (476) and back is 60 miles. To the end of the trail in both directions will be 92 miles. Optional Century ride offered with 8 mile on road loop (map provided).

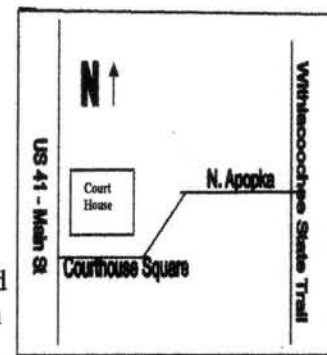
ENTRY FEE: \$20.00 per rider up to and including the pre-register day of September 11, 2011. Entries post-marked or submitted after September 11, 2011 will be \$25.00 per rider. If confirmation desired, send a self-addressed, stamped envelope.

Children under 12 years of age and younger must be accompanied by an adult.

SAG STOPS: Five stops along the way will provide water, sports drinks and food. Restrooms are available at SAG stops. All support ends at 3PM.

DOOR PRIZES: All door prizes will be given to randomly selected pre-registered riders only and will be available for pick up from 9AM to 2PM on ride day. At least one bike will be included in the door prizes.

For more information call: (352) 527-9535 or e-mail: richg37s@yahoo.com.



Please detach and mail with check **payable** to: Rails to Trails of the Withlacoochee, Inc., 6077 N Peardale Ter, Pine Ridge, FL 34465

Last Name: _____ First Name: _____ Male Female Age: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) _____ Email address: _____ (Please Print)

Short Sleeve T-shirt: (Please Check One) SM MED LG XL XXL (\$2 more) **AMOUNT ENCLOSED**

I plan to ride (for information only): 14 miles 30 miles 48 miles 60 miles 100 miles Other \$ _____

Emergency Contact: _____ Phone: _____

I hereby waive, release and discharge any and all claims for damages for death, personal injury or property damage which I or my minor child may have, or which may hereafter occur to me or my minor child as a result of my or their participation in any bicycle rides conducted by the Rails to Trails of the Withlacoochee. This release is intended to discharge in advance the Rail to Trails of the Withlacoochee, Inc., Department of Environmental Protection, and Office of Greenways and Trails or any member thereof leading a ride for the club from any and all liabilities arising out of or connected in any way with my participation or that of my minor child in any bike rides, even though that liability may arise out of negligence or carelessness on the part of the persons or entity mentioned above. I certify that my level or that of my minor child of physical conditioning is appropriate to compete in the Rails to Trails Annual Bike Ride and there are no known reasons why I or my minor child should not participate. I further understand that serious accidents may occur during the bike ride, and that participants in bicycle events may sustain mortal or serious personal injuries, and/or property damages, as a result of participation. I further understand that I or my minor child must wear proper safety equipment, including, but not limited to helmets, during all bike rides. Knowing the risks of bicycle riding, nevertheless, I hereby agree to assume those risks for my myself or my minor child and to release and hold harmless all of the persons or entity mentioned above who might otherwise be liable to me (or my heirs or assigns) for damages. It is further understood and agreed that this waiver, release and assumption of risk is binding on my heirs and assigns.

Please place a check in the box to signify that you have read and consent to the above Waiver and type your name in the space provided:

Signed by: _____ Participant, or Parent of Minor Date: ____ / ____ / 2011