



Wine Country Bike Trek, Pedal for People - June 24-26, 2011

NEW RIDER REGISTRATION FORM

www.winecountrybiketrek.com

Personal Information:

Name: _____ Date of Birth: ____-____-____ Sex: M F

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

Phone: (____) _____ - _____ School or Employer: _____

E-mail: _____ Preferred method of receiving future ride information: Email Mail.

Were you recruited by a trekker? Yes No Name of Trekker: _____

Sign Me Up For:

Early Bird Special (Must be paid before March 31, 2011): \$40

Regular Registration (Payments after March 31, 2011): \$50

Yes, I would like to pre-order this year's commemorative Jersey for \$65 each. Quantity: _____ Size(s): _____ Total: \$ _____
Note: Jersey's will only be ordered if we reach the minimum order of 30

Payment Information:

Total Enclosed \$ _____ Check Cash Master Card Visa AmEx Discover

Card # _____ Name on Card: _____

Expiration Date: ____/____ Signature: _____

T-shirt Size: S M L XL XXL

Saturday Night Dinner: Chicken Veggie Steak

Teams: I am interested in forming or joining a team. Team Name (if known): _____

I have signed the legal waiver on the back of this form: Yes No

Medical Release Information:

Do you have any medical condition, which may impair your ability to cycle or could require special attention? Yes No

If Yes, please explain: _____

Date of Birth: _____ Social Security Number: _____

Insurance Carrier: _____ Group # or Medical ID #: _____

In Case of Emergency Contact:

Name: _____ Relationship: _____

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

Day Phone: (____) _____ - _____ Evening Phone: (____) _____ - _____

Please mail this form and nonrefundable fee to (Checks made payable to PHP):

Donna Beal, 919 Stacy Ann Terrace, Santa Maria, CA 93455 Tel. 805-938-1620