Ten Weeks to a Century
Helena Bicycle Club - 2009

To participate in this HBC training program please complete this form and return it along with a check payable to Helena Bicycle Club. Please print legibly. One rider per form. Copies of entry form are acceptable.

- **Kickoff meeting and first ride - Saturday, May 2, 2009 @ 2 pm at the Broadwater Cupola Reber Park on Colonial Drive.**

Last Name	First Name	Age
Address		Gender
City	State	Zip
Phone daytime: ( ) evening: ( )	E-mail * **for confirmation of registration & important info**	

Emergency Contact .

Name	Relationship	Phone ( )

Registration Fees (please check appropriate boxes) – Your registration covers training materials and information and allows participation in group training rides. Registration for the One Helena Hundred on July 18, 2009 is not included.

o Ten Weeks to a Century – Helena Bicycle Club Member.....Free	
o Ten Weeks to a Century – Non- Helena Bicycle Club Member..... $10.00	$
o 2009 Helena Bicycle Club Membership..... $20 individual/ $30 family	$
TOTAL .....Check or money order for this amount should be enclosed.....	**$**

My goal is to ride a century of: ☐ **100 miles or** ☐ **100 kilometers (approx. 62 miles)**

Representation and Acknowledgement:
I hereby represent that I am in good physical condition for this event. I understand the routes are challenging and not chosen for safety. I understand that this is a non-competitive event and not a race. I further represent I have the ability and equipment to handle the route and any weather conditions. I agree to wear an ANSI-approved bicycle helmet, and I understand a rear-view mirror is recommended.

Release from Liability:
In consideration of the acceptance of the registration, by signing this release (parent or guardian, if registrant is under 18 years of age), I hereby release for myself and my kin, and waive any claims of action against the Helena Bicycle Club, its officers, directors, members, agents and all other persons or entities from all liability arising out of any injury to persons or property, and any loss, damage or expenses arising out of my participation in this event.

Application is not valid without signature!

Signature of Participant	Signature of parent or guardian, if participant under 18 years of age	Date

mail form and payment to:

HELENA BICYCLE CLUB, P.O. BOX 4682, HELENA, MT 59604-4682