

# ~~Larry Schwartz Memorial Tinbutt 12-Hour Meltdown~~

## Entry Form

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Year of birth \_\_\_\_\_

E-mail \_\_\_\_\_

*(We do not share e-mail addresses. We respect your privacy and use your e-mail only to notify you of the next year's Tinbutt event.)*

### CLASSES (Check one.)

- Single       Recumbent  
 Tandem       Other

Specify if "Other" \_\_\_\_\_

### TEE SHIRT \$7.50 EA.

No./Size \_\_\_\_/S      \_\_\_\_/M

\_\_\_\_/L      \_\_\_\_/XL

\_\_\_\_/XXL

### RIDE CATEGORY (Check one.)

- 12-Hour Tinbutt  
 Fun Ride

### POST RIDE MEAL \$5.00 EA.

- BBQ, No. \_\_\_\_  
 Veggie, No. \_\_\_\_

### RIDE FEES

\$30 per bicycle (single or tandem)

\$35 per bicycle after July 15

\$5 per Fun Rider (non-competing)

### FEES TOTALS

Tee Shirt Total \_\_\_\_\_

Meal Total \_\_\_\_\_

Ride Fee Total \_\_\_\_\_

**TOTAL Fees** \_\_\_\_\_

**The waiver below must be completed and signed before your entry will be accepted.**

## Waiver and Release of All Claims

This waiver/release claim must be signed before the registration entry above will be accepted. I, the undersigned, understand the risks involved and assume full and complete responsibility for any injury or accident that may occur during my participation in the Red Dirt Pedalers' hosted **2006 Larry Schwartz Memorial Tinbutt 12-Hour Meltdown** and/or **Fun Ride**. I hereby release and hold harmless the sponsors, promoters, and all other persons and entities associated with this tour. I further understand that a bicycle is a legal vehicle in the State of Oklahoma and that I must wear a CSPC approved helmet, follow event rules, and ride in a legal and safe manner.

\_\_\_\_\_  
Rider's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian's Signature (if rider is under 18 years old)

\_\_\_\_\_  
Date

I, as parent/guardian of the above named minor hereby give my permission for my child/ward to participate in the **2006 Larry Schwartz Memorial Tinbutt 12-Hour Meltdown** and/or **Fun Ride**, and further understand and agree, individually and on behalf of my child/ward to the terms above.

**In case of an emergency, notify:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Phone