



TOUR DE DELLS REGISTRATION FORM

Make checks payable to: Dells Area Cyclists & mail with completed entry to:

Joan Fordham, 125-15th Ave.; Baraboo, WI 53913

(608)356-8927 Email: dfordham@chorus.net

www.tourdedells.com

Name _____ Wisport Member Yes ___ No ___
Address _____ Age (as of May 5, 2007) _____
City, State, Zip _____ Sex M ___ F ___
Email _____ Telephone _____
Enter me in: 10 am-Road Race ___ 2 pm-Mountain Bike Race ___
... Or Best of Both ___ (both races)

I will participate in the Tour de Dells and thereby waive, release and dismiss all claims from damages and personal injury which may occur before, during or after the above named event, against any and all race officials involved with the event, including all persons or organizations in any way involved with the race. I also hold harmless Columbia and Sauk Counties, Wisconsin including all departments' persons. I further certify that I am physically fit to participate in the above named event and understand that bicycling is a potentially dangerous activity.

Signature _____ Date _____

Registration Fees: **Pre-Registration** (by April 13, 2007)
\$25.00 per person (1 race)
\$40.00 per person Best of Both (both races)

Event Day Registration

Registration is at the race site one hour prior to each race.

\$35.00 per person (1 race)

\$50.00 per person Best of Both (both races)

Tour de Dells Major Sponsor



www.dellsmoosejaw.com
(608) 254-1122