



PRIDE, INC. CYCLOCROSS & 5K RUN RACE SERIES

Event: September 12th _____ October 10th _____ October 24th _____ November 7th _____

Last Name _____ First Name _____

Phone Number _____ Email Address _____

Street Address _____

City _____ State _____ Zip Code _____

Emergency Contact Name _____ Emergency Contact Phone _____

Age this year _____ Team _____

USA Cycling License Number _____

Registration is \$25 for "A" "B" & "C" Cyclocross Races
Registration is \$20 for Beginner Cyclocross Races
Registration is \$15 for 5K Run
Day of event registration begins @ 10:30 am, and closes 15 min before each race.

Race Category _____

Fee \$ _____

1 Day License Fee (\$10 if applicable) \$ _____

Total \$ _____

Please mail this form (7 days before the event) with check (made-out to: "Pride, Inc.") to the address listed below or:

Register @ "Wild Trak Bikes" or "Gear Up"

Pride, Inc.
P.O. Box 830
Godfrey, IL 62035