

Pre-register in person or by fax/credit card to
The Radical Edge
Cut Off time Saturday, May 16th, 3:00pm

On-site Registration May 17th, 9-11:30am at
Nashwaak Valley school, Durham Bridge.
**\$10 late fee applied to all categories except
"D"**

ENTRY FORM / FORMULAIRE D'INSCRIPTION
Located under Membership tab at www.velo.nb.ca
Or in Velo NB forms

Fax the form if paying by **Credit Card ONLY** to:

Fax (506)- 457-0420

NOTE: Combined event time required for awards and
cash prizes. Draw prizes to follow.

Time Trial – Starts at 10:30am

Distance 11Km

Road Race – Starts at 1:00 pm

Distance 1-6 laps (18 km loop)

Fees: Combined Event (TT & RR).....\$35-\$45

CATEGORIES FEES & FRAIS CATÉGORIES:
Ability based category system as per Velo NB

Category "A" = \$45.00 (Highest Level)

Category "B" = \$40.00 (Sport Level)

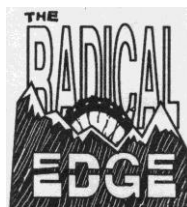
Category "C" = \$40.00 (Sport Level)

Category "D" = \$30.00 (Entry Level)

Awards.....4:00 pm or earlier

**Mandatory Check-in and plate pickup one-
hour prior to posted start time if Pre-
Registered. Licenses required**

Sponsors



Picaroons Brewing Company Inc



Sanctioned By



Important Note:

If you do not have a Velo NB/ CCA license you
may race in the "D" Category at the listed price.



**6th annual
Tour de Dog Loop
(Stage Race)
Time Trial & Road Race
F'ton May 17, 2009**



**Presented By
Radical Edge Cycling Club**

Located at Nashwaak Valley School, Durham Bridge on
Route 628, (1 km east of Hwy #8)
Follow Route #8 North from Fredericton
for about 15 kms then cross the Durham Bridge

Race Information

The Radical Edge
386 Queen St. Fredericton
459-3478 phone
457-0420 fax

Bev Bunker 457-4045/bbunker@nbpower.com

**Tour De Dog Loop
ENTRY FORM
FORMULAIRE D'INSCRIPTION**

**FEES & CATEGORIES
FRAIS & CATÉGORIES
Ability Based**

First Name/Prénom _____
 Last Name/Nom _____
 Address/Adresse _____
 City/Ville _____
 Province/State/État _____
 Postal Code/Code Postale _____
 Country/Pays _____
 Tel. H/M _____ W/B _____
 E-mail _____
 Sex/Sexe M / F _____
 Age (as of Dec 31/09) _____
 D of B / D de N _____
 Medical Alert/Allergies _____
 Emergency Contact/Contact en cas d'urgences _____

 Contact Tel _____
 Payment Type (circle one)
 VISA / MC / CASH / CHEQUE _____
 Card # _____
 Expiry Date _____
 Card Holder Name _____
 Card Holder Signature _____

| ROAD CATEGORIES / CATÉGORIES | TT | RR | Comb |
|------------------------------|-------------------------------|-------------------------------|-------------------------------|
| ROAD CLASSES | | | |
| "A" | <input type="checkbox"/> \$25 | <input type="checkbox"/> \$25 | <input type="checkbox"/> \$45 |
| "B" | <input type="checkbox"/> \$25 | <input type="checkbox"/> \$25 | <input type="checkbox"/> \$40 |
| "C" | <input type="checkbox"/> \$25 | <input type="checkbox"/> \$25 | <input type="checkbox"/> \$40 |
| "D" | <input type="checkbox"/> \$25 | <input type="checkbox"/> \$25 | <input type="checkbox"/> \$30 |
| TOTAL DUE | | | |

TT – 11Km out and back
 RR – 18km Loop
 Cat "A" 6 Laps = 108 Km
 Cat "B" 5 Laps = 90 Km
 Cat "C" 3 Laps = 54 Km
 Cat "D" 1-2 Laps = 18-36 Km

Plate/Plaque# _____ License # _____ UCI Code _____
 Club Team/Équipe _____
 There are no refunds due to rider cancellation. Aucun remboursement. The event goes rain or shine. **Riders must have a full license or ride in "D" Cat.**

WAIVER

I, the undersigned, agree and understand that there are inherent risks and dangers attached to the sport of cycling and the cycling competitions. I agree to assume completely those risks and dangers of whatever nature. Moreover, I agree to assume solely full responsibility for all damage of any nature that I might cause to third parties. Moreover, in consideration of the acceptance of my registration at this event as a competitor, I hold free and harmless from any liability the organizers, its administrators, its organizing committee, its employees, its representatives, its volunteers, the site owners, the Canadian Cycling Association, its representatives and volunteers, Velo NB Inc., its representatives and volunteers, the town, the owners of the lands, all sponsors and organizations involved in the event, as well as any other corporation or person directly or indirectly involved in this event. I therefore waive my right to claim and my right of action against each and every person mentioned in the forgoing lines in relation with the occurrence of any loss, damage or injury of any nature that I might sustain regarding this event, before, during and after its happening. I here by acknowledge that I recognize the risks inherent in participating in cycling and have prepared adequately for such, I hereby assume all risks in same. **I have read and understood the above wavier.**

Exonération de responsabilités

Je, sous-signé(e), reconnais et comprends que la pratique du sport de cyclisme et les compétitions sportives s'y rattachant comportent des risques et des dangers inhérents. J'accepte de les assumer intégralement quelle que soit leur nature. J'accepte, de plus, d'assumer seul(e) la responsabilité de tout dommage de quelque nature que ce soit que je pourrais subir ou que je pourrais causer à autrui. De plus, considérant l'acceptation de mon inscription comme compétiteur à cet événement, je dégage de tout responsabilité les organisateurs, son conseil d'administration, son comité organisateur, ses employés, ses représentants et bénévoles, le site, l'Association cycliste canadienne, ses représentants et bénévoles, Velo NB inc., ces représentants et bénévoles, la ville, les propriétaires des terrains utilisés, ainsi que tous les commanditaires et organismes reliés à l'organisation de la course ou indirectement impliqués dans l'organisation de cet événement. Je renonce donc à toute réclamation et à toute procédure quelconque à l'encontre des personnes mentionnées précédemment, suite à la survenance de pertes, dommages ou blessures de quelque nature que ce soit que je pourrais subir à l'occasion de cet événement et cela avant, pendant et après celui-ci. Je Soussigné(e), reconnais et comprends que la pratique du sport du vélo et les compétitions sportives s'y rattachant comportent des risques et des dangers inhérents. **J'ai lu et je comprends cette exonération de responsabilité.**

Pre-register at The Radical Edge by sending payment by fax/credit card to the Radical Edge.

Please make your cheque payable to: **Radical Edge**

S.V.P. poster et faire le cheque au nom de:

Mail To: The Radical Edge
 386 Queen ST. Fredericton
 N.B. E3B-1B2

Fax: this form if paying by **credit card ONLY**
 to **(506)- 457-0420**

Signature (Parent or Guardian if under 18 years old/Signature d'un parent ou tuteur, si moins de 18 ans)

Date