



ABD CYCLING & THE CITIES OF WOODDALE AND BATAVIA PRESENT THE

MEMORIAL DAY WEEKEND MASTERS' RACES



OVER \$13,500 IN CASH & PRIZES!!!

Saturday, May 24 & Sunday, May 25: Wood Dale, IL
Monday, May 26: Batavia, IL

DAILY SCHEDULE		
Start	Categories	Distance
9:00 am	Masters Cat 5: Riders 30 & older who've raced less than 15 mass start events	5 laps
9:30 am	Masters Men 70+/75+/80+ Masters Women 60+ & 70+	30 min+3 laps
10:15am	Masters Women 30+, 40+ & 50+ Masters Men 60+ & 65+	30 min+3 laps
11:00am	Masters 30/40/50/60 Cat 4's Only!	Sat & Sun: 40 min+3 laps Monday: 30 min+3 laps
11:45am	KIDS' RACE: Monday ONLY	
12:20pm	Masters 40+ 1,2 & 3 only	45 min + 3 laps
1:15 pm	Masters 50+	40 min + 3 laps
2:05 pm	Masters 30+ 1,2 & 3 only	60 min + 3 laps

WHEN & WHERE:

SAT, May 24: Oakwood Business Park, Mittel Dr & Wood Dale Rd, Wood Dale, IL (South Course)

SUN, May 25: Oakwood Business Park, Mittel Dr & Wood Dale Rd, Wood Dale, IL (South Course)

MON, May 26: Wilson St & Route 31, Batavia, IL

On-Site Registration opens at 8:00 AM.

COST:

Masters Category 1 through 4: \$25 per race before May 19th. *Just \$15 for the 2nd race of the same day.*

Masters Category 5: \$10 per race before May 19th

After May 19th: Add \$5 late fee PER RACE ENTRY

REGISTER: Online before May 19: www.Active.com, Mail before May 19: Complete and send the **ABR**

Waiver below and entry fees to: ABD Cycle Club, 6850 N. Lincolnwood Dr, Lincolnwood, IL 60712.

Day of Race registration opens on-site at 8:00 AM

All races are part of the 2008 WI/IL Rider of the Year Competition!



TREK



prairie path cycles



SHIMANO



2008 Accident Waiver and Release of Liability

I acknowledge that this athletic event is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of athletes, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors, and/or producers of the event, and lack of hydration. These risks are not only inherent to athletics, but are also present for volunteers. I hereby assume all of the risks of participating and/or volunteering in this event. I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently trained for participation in the event and have not been advised otherwise by a qualified medical person.

I acknowledge that this Accident Waiver and Release of Liability (AWRL) form will be used by the event holders, sponsors and organizers, in which I may participate and that it will govern my actions and responsibilities at said events.

In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me or my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS: American Bicycle Racing, Inc., Community Middle School District 34, their directors, officers, employees, volunteers, representatives, and agents, the event holders, event sponsors, event directors, event volunteers; (B) indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of any of my actions during this event.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident and or illness during this event.

I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and or assigns.

This AWRL shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I hereby certify that I have read this document; and, I understand it's content.

Signature of entrant: _____ ABR member number: _____

Name of event : ABD Memorial Day Weekend Masters' Races Today's date: _____

Date of events: 5/24/08 Wood Dale Crit 5/25/08 Wood Dale Crit 5/26/08 Batavia Crit
(any event you participate in on the above date(s) is covered by this single waiver)

Name, printed: _____

Your address: _____ City, State & Zip: _____

Your Phone Number: _____ Email Address: _____

Call in case of emergency: _____ Phone: _____

Ability Category Entered: _____ OR Age Group Entered: _____ Racing Age: _____

Racing club: _____ (if none enter "Unattached")

PARENT GUARDIAN WAIVER FOR MINORS (Under 18 Years Old)

The undersigned parent and natural guardian or legal guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parents or legal guardian.

Signature of Parent of Guardian _____ Date _____

