

COLAVITA OHIO CYCLING PRESENTS

# TIME TRIAL SERIES 2007



**DATES** Saturday, March 31, April 28, May 26, June 30 July 28, August 25, September 29

**CATEGORIES** M/F 18 and under, 20-29, 30-39, 40-49, 50-59, 60-69, 70-79, Tandems, Fixed Gear, Stoker-Kid, HPV/Recumbent

**TAKE NOTE** The September 29th event will offer a 4 rider team time trial challenge. The fastest team takes home \$250 cash.

**DIRECTIONS** The Triangle 4035 State Route 502, Greenville, Ohio 1/2 acre gravel parking area. There will be no restrooms or water available at start.

**COURSE** 20k out and back route. This course is as good as it gets on a out and back, lightly traveled state highway that turns into a country road near the Indiana state line. Overall the course is mostly flat with some false flats and climbs thrown in to break your rhythm on excellent pavement. A headwind guaranteed on the way out, tailwind on the way home. No stop signs.

**THE PRO CHALLENGE** Can you beat the Pro? Have you always wanted to know how fast they really go? At times during the season pro riders will be contesting the TT, come see how you measure up.

**START** The event starts promptly at 8:00am. Riders start in 60 second intervals.

**REGISTRATION** Same day registration opens at 7:00am and closes promptly at 7:45am. Registration is located at tent in parking lot. Riders start TT in order registered. Cost is \$10 per rider, \$2 Juniors. Event runs rain or shine. No USCF license required. This event is insured by the American Bicycle Racing Association. Juniors under 18 years of age are required to have parent or guardian signed release form. Event Limit - 100 riders.

**RULES** Snell approved helmets are always required while on the bike. No head fairings permitted. Absolutely no drafting. Bikes must have 2 working brakes. If passing another rider, announce your intentions. No follow vehicle allowed. Keep right. Keep start finish area clear. Promoter reserves the right to refuse entry of any disruptive/disrespectful rider. Pro riders welcome for training, but are not eligible for prizes (call ahead for housing).

**RESULTS** The results will be announced as quickly as possible after the last rider completes the event. The results are announced at the registration tent. Results are also posted on [colavitaohiocycling.com](http://colavitaohiocycling.com) by 1:00 PM the next day. Results may not always be available as a handout at the end of the race.

**PRIZES** Medals for top three in each category at each event. Fastest time of the season for overall Men and Women will be awarded \$100. Season long awards competition for each category, with Championship jersey provided to winner. Riders must compete in at least 5 events to be eligible. Occasionally free swag will also be given out when provided.

Additional Information:

[www.colavitaohiocycling.com](http://www.colavitaohiocycling.com)  
[info@colavitaohiocycling.com](mailto:info@colavitaohiocycling.com)

Event Sponsored by:



# 2007 Accident Waiver and Release of Liability 11/05

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., 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 \_\_\_\_\_ Date of event \_\_\_\_\_ Today's date \_\_\_\_\_

Name, printed \_\_\_\_\_

Your address \_\_\_\_\_ City, State & Zip \_\_\_\_\_

Your phone number \_\_\_\_\_ Email Address \_\_\_\_\_

Call in case of emergency \_\_\_\_\_ Phone \_\_\_\_\_

Ability Category entered \_\_\_\_\_ or Racing Age Category entered \_\_\_\_\_ your age \_\_\_\_\_

Racing Club / Sponsor \_\_\_\_\_

## 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 or Guardian \_\_\_\_\_ Date \_\_\_\_\_