

Photo ID Required for Packet Pick Up

33rd El Tour benefits
Shay's Vision

33RD El Tour de Tucson

presented by CASINO DEL SOL RESORT

*America's Largest Perimeter Bicycling Event
for Cyclists of All Ages and Abilities*

Ride 104, 75, 55, or 40 Miles or
Fun Ride of 11 Miles, 5 Miles & 1/4 Mile



Shay's vision aims to inspire visually impaired children and teens to be physically active and productive members of their community through tandem biking, improving overall health and well-being of these individuals. Shay's Vision will provide these young people the opportunity to experience the freedom and excitement that comes with riding a bicycle.

SATURDAY, NOVEMBER 21, 2015

FEES & CONTRIBUTIONS

To ride for Shay's Vision in the 2015 El Tour, all cyclists must pay the registration fee of \$135 *plus* set a goal to raise \$100 or more in contributions. Contributions may be tax-deductible as allowable by the I.R.S.

- (a) To register as a Shay's Vision cyclist, please submit your completed application along with collected contributions by November 11, 2015.
- (b) If registering after October 31, 2015, there is a late fee of \$50.
- (c) **Registration closes on November 11, 2015. Absolutely no refunds.**



EVENT BENEFITS

• Entry into El Tour	• El Tour Medallion upon finishing
• El Tour event t-shirt	• Entry into El Tour Downtown Fiesta
• Electronically timed finish	• Entry into El Tour Bike, Fitness and Health Expo
• SAG & First Aid support	• El Tour event poster
• Results printed in <i>Tail Winds</i> newspaper and/or online at www.perimeterbicycling.com	



Raise \$1,000 or more for
Shay's Vision
and receive an

El Tour Conquistador
El Tour's most prestigious symbol.

Making A Difference

Through cycling, Shay's Vision will provide kids and young adults the opportunity to experience the freedom and excitement that comes with riding a bicycle. Shay's Vision will strengthen each individual's self-esteem and confidence through recreational and social activity.

REGISTRATION INSTRUCTIONS \$50 Late Fee in effect after October 31, 2015

Deadline for entry is November 11, 2015.

Mail completed application with collected contributions (with \$50 late fee if applicable) to:

**Shay's Vision
PO Box 1321**

Sahuarita, Arizona 85629

All checks and money orders are made payable to Shay's Vision.

For more information:

520-508-0883 shaysvision@yahoo.com www.shaysvision.com

OFFICIAL HOTELS

The best rates available!
El Tour's Host Hotels!

Visit El Tour's
ACCOMMODATIONS link:
perimeterbicycling.com/el-tour-de-tucson

Online reservations are being
accepted NOW!

*Room blocks are limited and
fill up fast.*

See reverse side for application and Rider Waiver Form.

SHAY'S VISION - EL TOUR APPLICATION & WAIVER FORM

Name _____ Birth Date _____ Sex _____

Address _____ Home Phone _____

City _____ State _____ Zip _____ Cell Phone _____

E-mail Address _____ Occupation _____

Emergency Contact _____ Special Instructions _____

Emergency Phone _____

Please answer all questions:

- (1) Check the distance you will ride
 104-Mile 75-Mile 55-Mile 40-Mile
 Visit www.perimeterbicycling.com to learn about the **El Tour Fun Ride** (1/4-mile, 5-mile & 11-mile distances)
- (2) Type of bike you will ride. *No Motorized Bikes!*
 Road/Hybrid Mountain Recumbent Handcycle
 Tandem (separate fees and application for each rider)
 Name of Tandem Partner _____
- (3) How much are you enclosing now? (*Read Fees & Contributions on other side*)

(4) **El Tour T-Shirt Size (check one)**
 Youth M (10-12)
 Adult S M L XL XXL XXXL

- (5) Where are you staying for the event?
 Home Friends/Family
 Hotel (please name) _____
- (6) **Please check that you read and agree to the following:**
 Aerobars are not permitted
 CPSC-approved helmet must be worn
 I understand that headsets/earbuds blocking both ears is prohibited
 There are no refunds or transfers
 Photo ID required for packet pick-up
 I read and signed the Rider Waiver form below

Registration Fee ***	\$135
Additional Contribution (\$100 minimum)	
Late Fee of \$50 (if submitted <i>after</i> October 31)	
TOTAL ENCLOSED: All checks and money orders made payable to Shay's Vision.	

All registrations & fees must be received by November 11, 2015.
 ***\$20.00 of each registration goes to Easter Seals, El Tour's primary beneficiary.

If paying by credit card, please complete the information below.

Visa MasterCard Discover American Express

Card No. _____ Exp. Date _____

Name on Card _____ Security Code on Back _____

Zip Code _____



SANCTIONED BY PERIMETER BICYCLING ASSOCIATION OF AMERICA, INC.

In signing this waiver as a participant in **El Tour de Tucson**, I understand and accept that I must obey all laws of the State of Arizona that may apply to my activities during this event, especially traffic laws. Unless instructed to the contrary by a law enforcement official, I will comply with all traffic regulations including traffic signals, devices, signs and other traffic rules. **El Tour closes at 5:00 p.m. on Ride Day and all course support will end at that time. I understand that if I continue on the course after 5:00 p.m. I am solely and completely responsible for my own safety and support and must obey all laws, including proper lighting on my bicycle after dusk.**

In consideration of my signing this agreement, I, the undersigned, intending to be legally bound, hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages, including, but not limited to, the loss of my bicycle, helmet or any other personal items, I may have against the State of Arizona, Arizona Department of Transportation, Arizona Department of Public Safety, City of Tucson, City of South Tucson, Pima County, Easter Seals Blake Foundation, Shay's Vision, Perimeter Bicycling Association of America, Inc., Town of Oro Valley, Town of Marana, Sol Casinos, any other associated agency or beneficiary, any and all governmental and tribal agencies, and any and all underwriters and their representatives, successors and assigns for any and all injuries suffered by me as a result of taking part in this bicycling event and any related activities. I attest that I will participate in this event as a bicycling entrant; I will wear a CPSC-approved bicycle helmet; that I am physically fit and have sufficiently trained for the completion of this event and that my physical condition has been verified by a licensed medical doctor. Further, I hereby grant full permission to any and all the foregoing to use any photographs, videotapes, motion pictures, recordings, or any other record of this event for any legitimate purpose. I understand that I will receive periodic communication from Perimeter Bicycling in the form of USPS or electronic mail and that I may unsubscribe from such mailings at any time by directly contracting Perimeter Bicycling.

The event utilizes open public roads, which may or may not be maintained by local municipalities, cities, counties, and/or the State. The event is not responsible for the condition and maintenance of the roads. Road hazards are always possible and in entering this event, and signing this waiver, I agree and understand that I must be alert to all road hazards, including but not limited to: pot holes, uneven pavement, road cracks, road debris, unfinished construction and motor vehicle traffic.

I understand that aero-type and other similar handlebars are prohibited in this event and that utilizing such bars may result in my disqualification. Furthermore, I am responsible for all my personal items including, but not limited to cameras, cell phones, clothing, bicycles, etc. **I understand that there are no refunds or transfers of registration to another person or event.**

I understand that I will receive a "chip" (transponder) so I can be timed in this event. I understand that I am responsible for properly mounting the device to my bicycle and that improper mounting may result in NO TIME being recorded.

I understand all fees and collected contributions are nonrefundable and nontransferable. Rider Numbers are also nontransferable.

Rider's Signature _____ Date _____

Parent/Guardian (if rider is under 18) _____ Date _____

BEFORE COMPLETING APPLICATION, READ INFORMATION ON REVERSE SIDE.