

## 4th Annual Kenton Caper

## Saturday, September 10, 2011



Interested in becoming a Sponsor for the event? Call Kyle Corbin, event co-chair, at 328-2675 x 270.

## Benefiting the Developmental Disabilities Levy Campaign and Goodwill Easter Seals Miami Valley.

The ride will begin at Splash Zone (300 Eagle City Rd. Springfield, Ohio). Riders can begin any of the three tour route options between 9:00 a.m. and 9:30 a.m. (see Routes).

**Pre-Registration** is strongly recommended and is **required for all registrants interested in receiving a Kenton Caper T-shirt.** The pre-registration deadline is **AUGUST 12**.

**Check-In/Same Day Registration:** Those who are pre-registered and those registering the day of the event should check in at the registration tent (at Splash Zone) at least 30 minutes prior to desired departure time. The registration tent will open at 8:00 a.m. but safety coverage will not be available until 9:00 a.m.

Individuals with developmental disabilities with limited financial resources can apply for a Rider-ship sponsor. Mark your request on the registration form or contact the Tour Coordinator at

937-328-2729 x 290 for more details.

**T-shirts:** Those who pre-register by August 12 will receive a t-shirt (see entry form to select sizes). Those registering after this date will not be guaranteed a shirt, but limited quantities will be available at the event for purchase (\$10) on a first-come, first-served basis.

Fees Include: Registration fees include t-shirt (for those registered before August 12) snacks at two stops, a route map, road markings, and safety coverage.

**Registration Form:** Mail your <u>signed</u> form(s) along with payment (<u>check made payable to Developmental Disabilities Levy Campaign</u> <u>Committee</u>) to: **Kenton Caper,** 110 W. Leffel Lane, Springfield, OH 45505

Questions: Call the Tour Coordinator at 937-328-2729 x 290 or email at kentoncaper@ymail.com

Please complete one form for each pa	articipant		

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address:

\_\_\_\_\_

\_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Age: \_\_\_\_\_ (only necessary if registrant is under 18. Parent/guardian signature required if entrant is under age 18)

\_\_\_\_ Requesting a rider-ship sponsor

REGISTRATION FEES - ON OR BEFORE AUGUST 12						
1st Rider	Add'I family members (please complete one form for each person)			Total enclosed		
\$25.00	x \$20 =					
T-shirts						
Total # Small	Total # Medium	Total # Large	Total # XL		Total # XXL	

REGISTRATION FEES - AFTER AUGUST 12					
1st Rider	Add'I family members (please complete one form for each person)	Total enclosed			
\$35.00	x \$25 =				

## Can't participate? Sponsor a rider with a disability!

\_\_\_\_\_ # of riders you'd like to sponsor (\$25.00 each)

Checks	Payable	to:	<u>D</u>	evelopmer	ntal Di	sabili	ties L	<u>evy</u>
Campaig	n Commi	<u>ttee</u>	Mail	registratio	n form	and	check	to:
Kenton C	aper, 110	) W.	Leffel	Lane, Spri	ngfield,	OH 4	5505	

Signature (required)

**RELEASE:** in signing this release for myself or the named entrant (if entrant is under age 18), I acknowledge that I understand the intent hereof, and I hereby agree to and wi absolve and hold harmless the "Clark County Developmental Disabilities Levy Campaign Committee" and their officers and members, respectively, and any other parties con nected with this event in any way what-so-ever, singly or collectively, from and against any blame or liability for any injury, misadventure, harm, loss, inconvenience or damag suffered or sustained as a result of participation in the "Kenton Caper" Bike Tour (2011) or in any activities associated therewith. I, also, hereby consent to and permit eme gency treatment in the event of injury or illness. I shall abide by traffic laws and regulations and practice courtesy and safety. I realize a helmet is mandatory.