

**2017 Mt. Washington Century  
Registration Form  
Ride Date: July 29, 2017  
Please Print Rider Information**

Last Name:	First:	Middle:	Age Today:	Gender: (circle) M      F
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Mailing Address:	Apt#:	City:	State:	Zip Code:
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Home Phone #:	Cell #:	Email:
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**Ride Category (please circle one):**

Individual: \$110	Family (parent(s) & children): \$175	Group of 4: \$320	Group of 6: \$420
Individual Double Challenge: \$50	Junior (16 and younger): \$65	Group of 5: \$375	Group of 7: \$455

<b>Team Name:</b> _____	<b># of Riders:</b> _____	
<b>Name:</b>	<b>Address:</b>	<b>Email:</b>
1.		
2.		
3.		
4.		
5.		
6.		
7.		

**Emergency Contact Name:** \_\_\_\_\_

**Emergency Contact Phone:** \_\_\_\_\_

How did you hear about the Century? Circle One  
 Radio                      Internet                      Friend  
 Email                      Newspaper