



Delaware State Parks 2010 Adventure Race Series

Print and mail with payment and signed waiver to:

Delaware State Parks Adventure Race (Forms may be faxed to 302.577-7756)

P.O. Box 3782

Greenville, DE 19807

Name _____

Mailing Address _____

City, State, Zip _____

Phone _____ E-mail Address _____

Age on Race Day _____ T-Shirt Size: **S M L XL XXL**

***Be sure to sign waiver at end of application.**

Register now for multiple races!

_____ \$27 One or Two Races (per race, per participant)

_____ \$70 Three Races (per race, per participant)

_____ \$100 For Series (per race, per participant)

Please complete the race categories for each race below.

Saturday, May 22

The Fish Hawk Challenge – Cape Henlopen State Park (Team or Individual)

*Trail Run, Orienteering, Mountain Biking**

Pre-race Meeting at 8:30 a.m.

Race begins at 9 a.m.

_____ \$27 Advanced Registration (per participant)

_____ \$40 Late Registration after May 14 (per participant)

**road bikes not suggested*

Race Category (based on age)

20 and under _____ 21-39 _____ 40-50 _____ 51+ _____

Race Category (please circle one):

Mixed Double

Parent/Child

Male/Male

Female/Female

Name of Partner: _____

Saturday, June 19

Clash with the Creek – Brandywine Creek State Park (Team Event)

Mountain Bike, River Canoe, Orienteering

Pre-race Meeting at 8:30 a.m.

Race begins at 9 a.m.

_____ \$27 Advanced Registration (per participant)

_____ \$40 Late registration after June 11 (per participant)

Race Category (please circle one):

Mixed Double

Parent/Child

Male/Male

Female/Female

Name of Partner _____

Saturday, July 17

Baldcypress Challenge – Trap Pond State Park (Team Event)

Road Bike, Trail Run, Flatwater Canoe, Paddle Boat

Pre-race Meeting at 7:30 a.m.

Race begins at 8 a.m.

_____ \$27 Advanced Registration (per participant)

_____ \$40 Late Registration after July 9 (per participant)

Race Category (based on age)

20 and under _____ 21-39 _____ 40-50 _____ 51+ _____

Race Category (please circle one):

Mixed Double

Parent/Child

Male/Male

Female/Female

Name of Partner _____

Saturday, August 7

The Millpond Challenge – Lums Pond State Park (Team or Individual)

Mountain Bike, Kayak, Trail Run

Pre-race Meeting at 7:30 a.m.

Race begins at 8 a.m.

_____ \$27 Advanced Registration (per participant)

_____ \$40 Late Registration after July 30 (per participant)

Race Category (based on age)

20 and under _____ 21-39 _____ 40-50 _____ 51+ _____

Race Category (please circle one):

Mixed Double

Parent/Child

Male/Male

Female/Female

Name of Partner: _____

Saturday, September 11

Bring it on at Bellevue – Bellevue State Park (Team Event)

Road Bike, Trail Run, Team Challenges

Pre-Race Meeting at 8:30 a.m.

Race begins at 9 a.m.

_____ \$27 Advanced Registration (per participant)

_____ \$40 Late Registration after September 3 (per participant)

Race Category (please circle one)

Mixed Double

Parent/Child

Male/Male

Female/Female

Name of Partner: _____

For more information, call (302) 655-5740, e-mail claire.mickletz@state.de.us, or visit www.destateparks.com/adventure-race

Waiver (must be signed)

In consideration of the acceptance of my entry, I, for myself, my executors, administrators and assignees do hereby release and discharge Delaware State Parks, and all associated sponsors of all claims and damages, demands, actions whatsoever in any manner arising out of my participation in said athletic event. I attest and verify that I have full knowledge of the risks involved in this event and I am physically fit and sufficiently trained to participate in this event. I have fully read and understood the race application, rules and information contained on the website or in the printed race application and will abide by all rules therein.

I understand that photographs will be taken at each race and that these photographs may be used for the advertisement of future Adventure Races.

Signature (Parent/Guardian if under 18) Date

Mail application and check or money order to:

Delaware State Parks Adventure Race P.O. Box 3782 Greenville, De 19807

Make checks and money orders payable to: Delaware Division of Parks and Recreation

***Pay by Credit Card:** VISA MasterCard Exp. Date: _____

Credit Card#: _____

3- Digit Security Code (on back): _____

Total (this is the total amount that will be charged to your card): \$ _____

Cardholder's Signature: _____

**Pre-registration only. Credit cards not accepted on race day.*

For more information, call (302) 655-5740

_____ I am enclosing a donation (optional) of \$ _____ to the Trail Stewardship Fund to help manage and maintain Delaware State Parks trail system statewide.