



memory. honor. hope.

Trail to a Cure Ride/Walk/Run 2009

Saturday, May 2, 2009 10 am to 5 pm

Katy Trail State Park, Rocheport, MO

EVENT PARTICIPANT PACKET

Participant Instructions:

- Pre-register as directed below as soon as possible.
- Registration fee is \$20 – if registration is submitted online, in advance. Online registration closes Friday, May 1.
- On-site on the day of the event, May 2, is \$30.
- We request that each participant raise a minimum of \$100 in sponsorships. All registered participants receive an event T-shirt and enjoy a post-event celebration with their friends and family at Les Bourgeois Winery A-Frame.
- Make checks payable to “Trail to a Cure, Inc.” - donations are tax deductible to the extent allowable by law.
- **100% of funds raised by participants will be passed along to Trail to Cure’s beneficiaries for the event: amfAR, the Foundation for AIDS Research, and Rain of Central Missouri.**

REGISTRATION (preferred method):

- Visit www.firstgiving.com/ttac to register online and contact potential sponsors via email. Firstgiving accepts credit/debit cards.
- **Only if you can't do that**, complete and mail this page, along with a signed ACCIDENT WAIVER AND RELEASE OF LIABILITY (next page) by the registration deadline.
- Questions? Visit us on the web at www.AIDStrailtoacure.org, call 573.268.3841, or email info@AIDStrailtoacure.org. Week of event, please call 573.424.1574.

REGISTRATION (off-line only)

PLEASE PRINT CLEARLY (or submit all of your registration online at www.firstgiving.com/ttac and begin fundraising today)

Participant's Name: _____

Event Option - I plan to (choose one):

Ride (18 mi.) _____, **Ride** (32 mi.) _____, **Walk** (10K) _____, **Run** (10K) _____, **Run** (18 mi.) _____

Experience Level (if runner/rider): Beginner _____, Intermediate _____, Advanced _____

Age of Participant on Day of Event: _____

E-mail Address: _____

Mailing Address: _____

City, St., ZIP: _____ Phone: _____

Adult T-shirt Size: S__ M__ L__ XL__ XXL__ XXXL__ Team Name (if any): _____

ACCIDENT WAIVER AND RELEASE OF LIABILITY

(required for all participants)

I acknowledge that this athletic event is a 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, 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 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 including my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS:

Their directors, officers, employees, volunteers, representatives, and agents, the event holders, event sponsors, event volunteers; (B) Indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this event, whether cause by the negligence of releases or otherwise.

I hereby consent to receive medical treatment that 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 assigns.

The Accident Waiver and Release of Liability 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 its content.

PARENT OR GUARDIAN WAIVER FOR MINORS (under 18 years old on event date)

The undersigned parent and natural 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.

Participant's Signature: _____

Parent/guardian's Signature (if under 18 on event date): _____

Date Signed: _____



Trail to a Cure Ride/Walk/Run 2009

Saturday, May 1, 2009 10 am to 5 pm
Katy Trail State Park, Rocheport, MO

SUPPORT OUR GENEROUS SPONSORS

who made it possible for 100% of your fundraising to go directly to the fight!



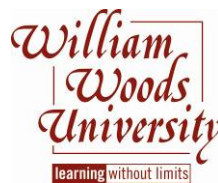
www.missouriwine.com

Host Sponsor



Trailside Café & Bike Shop - Rocheport, MO

Starting Gun Sponsor



www.thewoods.edu

Supporter

Additional Sponsorship Opportunities are Available.
Contact us in advance of the event @ info@aidstrailtoacure.org.

BEFORE THE EVENT...

Getting to the Event:

The nice folks at [bikekatytrail.com](http://www.bikekatytrail.com) have maps and other resources to help you get to Rocheport's Trailhead. See <http://www.bikekatytrail.com/viewImage.asp?iid=147>

A town map is also available: <http://www.bikekatytrail.com/rocheport.asp>

Places to Stay:

Rocheport has a number locally-owned bed and breakfast facilities, as does nearby Boonville (see list at <http://www.bikekatytrail.com/katytrailbandb.asp>). Columbia has ample hotel rooms as well.

On-site Registration:

On-site registration and participant check-in opens at **10:00 am** on the day of the event near the Rocheport Trailhead on the Katy Trail in Rocheport, Missouri.

Event Type/Distance Options (please choose one when you register; all times approximate):

- **Ride**-18 miles from Rocheport to McBaine round-trip; start at **12:00**, finish at 2:00.
- **Ride**-32 miles from Rocheport to Easley round-trip; start at **10:30**, finish at 2:00.
- **Walk**-10K from Rocheport to a designated mid-trail turnaround point, round trip; start at **11:30**, finish at 2:00.
- **Run**-10K from Rocheport to a designated mid-trail turnaround point; start at **12:30** finish at 2:00
- **Run**-18 miles from Rocheport to McBaine, round trip; start at **11:00**; finish at 2:00.

DURING THE EVENT...

Start/Finish Line Activities/Logistics:

Follow the signs to the banner at the start/finish line at the Rocheport Trailhead near the Trailside Café & Bike Shop.

Questions? See us at the On-Site Registration Table/Booth

A hospitality tent will be provided for participants and supporters in Rocheport until 2 pm.

Rest Stops:

Rest Stops with refreshments will be located:

- 3.3 miles out (10K turn around point)--MAJOR STOP
- 6.9 miles out (Huntsdale/Katfish Katy's)--minor stop
- 9 miles out (McBaine)-MAJOR STOP
- 13 miles out (Providence)--minor stop
- 16 miles out (Easley)--MAJOR STOP

Please be sure to thank our major rest stop sponsors/volunteers!

Wrenchers/Support:

We will have "wrenchers" with extra bike tubes, etc. available for purchase at Easley and at McBaine (no "SAG" wagons will be provided).

AFTER THE EVENT...

Post-Event Celebration:

Join your family, friends, volunteers, and Trail to a Cure organizers at the post-event celebration at [Les Bourgeois Winery](#) (A-Frame) beginning at 2 pm! The Post-Event Celebration runs from 2 to 5.

See web for directions: <http://www.bikekatytrail.com/site.asp?sid=162>.

Post-Event Survey:

Trail to a Cure is an ANNUAL event. To improve the experience and raise more funds for the cause, we would like your feedback!

After the event, participants and attendees should visit www.AIDStrailtoacure.org and complete the event survey to give us your suggestions/feedback.

Help Plan the next Trail to a Cure event!

If you would like to become involved in making this annual event possible, please contact us at info@AIDStrailtoacure.org, explaining what type of involvement appeals to you.

In **MEMORY** of those we've lost to HIV/AIDS.

In **HONOR** of those who live with HIV/AIDS.

In **HOPE** of finding a cure.

Thank you for participating!