

3rd Annual
East Tennessee
Mountain Bike Classic
JULY 16-17, 2005



Life Development Center
 PO Box 570
 Clinton TN 37717

Entry Form

Name: _____
 Address: _____
 City/State: _____
 Zip: _____
 Phone: _____
 Email: _____
 NORBA License & expiration date _____
 Age (as of _____): _____
 Emergency Contact & Phone _____

T Shirt Size: S ___ M ___ L ___ XL ___
 (Race T Shirt for pre registered riders
 registration received by _____)

Rider Classification: (check one)

Men: Senior Expert ___
 Master Expert ___
 Master Expert ___
 Senior Sport ___
 Master Sport ___
 Master Sport ___
 Masters ___
 Beginner ___
 Junior Expert ___
 Junior and up ___
 Junior and under ___
 Clydesdales (___ lbs) ___
 Singlespeeds ___
 Pro/Semi Pro ___

Women:
 Expert ___
 Senior Sport ___
 Sport Masters ___
 Beginner ___

Indicate which race(s) you are entering:

Cross Country ___ all racers

Mountain Cross ___ all racers

Mt Bike Time Trial ___ all racers except
 Juniors
 expert/semi pros

The race director has the right to combine or split classes based on participants
 All riders must present a current NORBA License and sign a Standard Athlete's Entry Form
 If under _____ signature of parent or guardian is also required
 A NORBA License may be obtained on site. One day licenses will available for all Categories
 All riders are required to wear an ANSI or Snell approved helmet during the race

Send Entry fees payable to:
 Life Development Center
 PO Box
 Clinton TN