



- **When:** April 29, 2006, Ride Day Registration & Packet Pick UP begin at 7:00 AM  
The ride starts promptly at 8:00 am with Staggered starts (100 milers go first).
- **Where:** San Marcos Hay's County Extension Office on Clovis Barker (Near the Civic Center).  
**Exit 201, East side of IH-35**
- **Why:** To help FLOW. Your neighbor's independence depends on you!!!
- **Distance:**
  - 100 miles
  - 62.5 miles
  - 40 miles
  - 20 miles
  - 10 miles
- **Cost:** **\$25** before April 21, after April 21, it is **\$30; Family Ride \$70** before April 21, after April 21, it is **\$75**
  - **ALL** Riders will receive a Tour de FLOW T-shirt and goodie bag.
  - Pre-registered Cyclists are invited to join us for a spaghetti dinner the evening before the race.
  - Non pre-registered riders and guests are invited to join us for the spaghetti dinner the evening before for \$5.00 per plate.

Full SAG support on each course and manned rest stops.

FLOW Office: 512-392-3569 Fax: 512-392-5069 [www.flowcares.org](http://www.flowcares.org) [info@flowcares.org](mailto:info@flowcares.org)

**FLOW's Mission:** To enhance the lives, through volunteer care giving, of our elders and people of all ages with long-term health problems.

**Directions:**

1253 Civic Center Loop  
San Marcos, TX 78666

If coming south on IH-35,  
Take Exit 201 and U-turn  
at McCarty Lane and turn  
right on Clovis Barker Rd.

If coming north on IH-35,  
Take exit 201. Pass McCarty  
Lane and turn right on Clovis  
Barker Rd.



## 3<sup>rd</sup> Annual Tour de FLOW Registration Form

**A registration form must be completed for EACH RIDER.** Mail registration forms and checks payable to **FLOW** post marked no later than April 21<sup>st</sup> to **FLOW 215 W. San Antonio St. Ste. 2108, San Marcos, TX 78666.** You can also register online at [http://www.active.com/event\\_detail.cfm?event\\_id=1307034](http://www.active.com/event_detail.cfm?event_id=1307034) or [www.flowcares.org](http://www.flowcares.org)

Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (M.I.) \_\_\_\_\_ (Age) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone(Work) \_\_\_\_\_ (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ Email: \_\_\_\_\_

Circle your T-shirt size SM MED LG XL XXL      Circle Distance 10 miles      20 miles      40 miles

Kid Sizes: SM MED LG XL      62.5 miles (metric century)      100 miles

Please enter the fee you choose. You may also make an additional donation.

Individual	_____	<b>\$25 (\$30 after April 21<sup>st</sup>)</b>
Family	_____	<b>\$70 (\$75 after April 21<sup>st</sup>)</b>
Optional Donation	_____	<b>Enter the donation amount</b>
	_____	<b>Total Check Amount</b>

Emergency Contact Person \_\_\_\_\_ Phone Number \_\_\_\_\_

Medical Conditions/Allergies \_\_\_\_\_

**Waiver:** I fully understand that my participation in the 3<sup>rd</sup> Annual Tour de FLOW could result in serious injury, illness or death. Although I fully appreciate these risks, I desire to participate without regard to the consequences. I waive all claims I may have against Friends Lend Others Wings (FLOW) or any other individuals, firms or organizations resulting in whole or part from m participating in the Tour de FLOW. This waiver shall be binding on my heirs, administrators and successors. Further, I hereby grant full permission to use photographs, videotapes, motion pictures, recording or any other record of this event for legitimate purpose.

Entrant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent of Minor: \_\_\_\_\_ Date: \_\_\_\_\_