



Record Attempt Summary

This form must be submitted within 14 days of the completion of the record attempt with an attached map showing the record route. **General Information:** mm $_$ dd $_$ yy $_$ Time of Start: hh $_$ mm $_$ \square a.m. \square p.m. Date of Start:

mm $_$ dd $_$ yy $_$ Time of End: hh $_$ mm $_$ \square a.m. \square p.m. Date of End: Total Elapsed Time: dd hh mm For Cross-Country/Cross-State/Point-to-Point/Capital-to-Capital Attempts: Describe starting and ending point exactly, so that the WUCA Records Chair or another rider may locate the starting and ending points correctly. Attach map with route highlighted or a route sheet. Starting Point: Ending Point: _____ Total Miles: _____ Number of Road Log Sheets: ____ Route Attached For Track or Road Course (Surveyed) Attempts: Track Location: Track Circumference (one lap): _____ \square miles \square km Number of Laps Ridden: _____ Number of Track Log Sheets: _____ Total Distance: _____ \square miles \square km Signatures of All Riders We the riders declare that I/we have ridden this record attempt fairly and in accordance with the Rules governing WUCA Record Attempts and that the above Record Attempt Summary is correct.

(rider signature)	(printed name)	(date)
(rider signature)	(printed name)	(date)
(rider signature)	(printed name)	(date)
(rider signature)	(printed name)	(date)
Signatures of <u>All Officials</u>		
(official signature)	(printed name)	(date)

(printed name)

(date)

(Continue overleaf if more riders or officials)

(official signature)