	#1	#2	#3	#4
ider Name(s)				
UMCA #				
mail address				
treet Address				
ity, State, Zip				
ountry				
hone number				
irthdate				
ender				

Color Key	
	Required by rider per application
	Post ride information - to be entered by records chair
	Required pre-ride items Needed - entered by Records chair
	Required post-ride item NEEDED by Rider
	Results to be entered by Record Chair

ype of record attempt		Point-to-point/Road/Indoor Track/Outdoor Track
oints or length and/or time		
	available length or time	100Mi/200Mi/300Mi/400Mi/500Mi/1000Mi/100Me/200Me/300Me/400M3/500Me1000Me//6-hr/12-hr/24-hr
pplication date		
roposed date		
ider Info:		Solo/Team
ider Info:		Male/Female/Team(M/F/Mixed/2-per/4-per)
ider Age at time of attempt		
ider Age Group		Youth (<18) / Senior (18-49) / Master (50-59) / Grand Master (60- / Great Grand Master (70+)
ike type:		Standard/Tandem/Recumbent/Faired Recumbent(HPV)/Paralympic
rack Name		
rack Length		(meters/feet)
rack Location		

orms received: Pre-rid	Application	Payment	Rider Release(s)	Pre-ride checllist	Maps/Route
date received->					

fficial List	Official #1	Official #2	Official #3	Official #4	Official #5	Official #6	Official #7	Official #8	<add more as needed>
fficial Name									
mail address									
treet Address									
ity, State, Zip									
ountry									
hone number									
irthday									
ender									
est emailed									
elease signed date									
fficial Cert signed date									
MCA official certified date									

rew list	Crew Chief	Crew member #2	Crew member #3	Crew member #4	rew member #	Crew member #6	rew member #	<add more as needed>
fficial Name								
mail address								
treet Address								
ity, State, Zip								
ountry								
hone number								