

# Ride for the Rock

March 6, 2010

Come out and ride with the community to help support Mark Ornitz and family. In 2005 Mark suffered a brain injury due to a cycling accident during a race. Mark continues to be strong during his continued rehabilitation. As fellow cyclists, teammates and club members we would like to honor Mark with this special ride to benefit the Brain Injury Association of North Carolina.

### Where:

Whole Foods Market, Inc., 102-B New Waverly Place, Cary, NC. 27511

**Please park in the back of lot.**

### When:

March 6, 2010, 9:00am roll out, on-site registration opens at 7:30am - rain or shine

### What:

100k and 50k loops, with sag support.  
Entry fee is \$15, or \$20 day of.  
Refreshments will be provided

### Registration Options:

- 1) Day of registration
- 2) Mail-in by March 3rd: to: BIANC at PO Box 10912, Raleigh, NC 27605
- 3) Online at <http://www.bikereg.com>

**T-shirts for purchase day of: \$10**

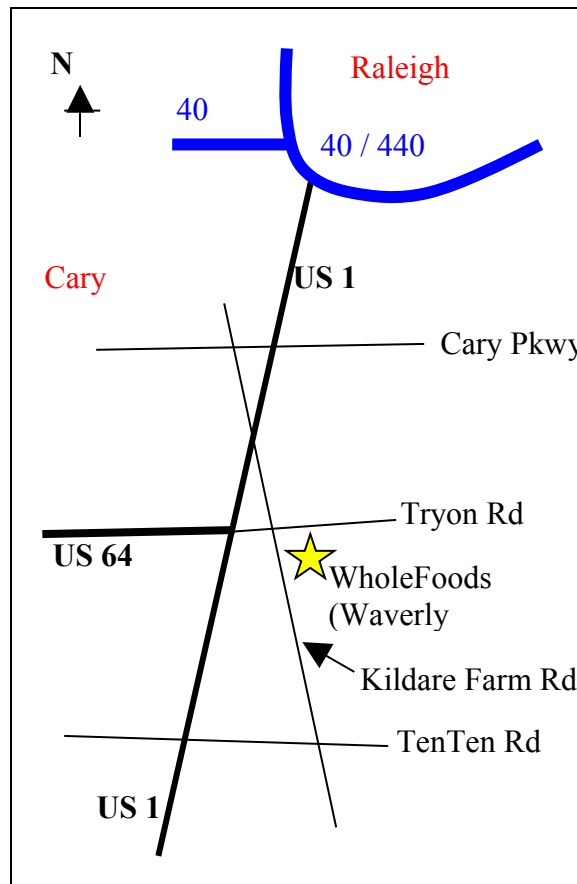
### Web Information:

<http://www.capcycling.org/>

### Receipt:

Total Donation : \_\_\_\_\_

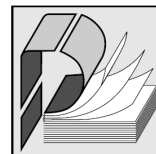
Directions: From US1 North or South, take the Tryon Rd. exit. Take right on Kildaire Farm Rd. Take left at 1<sup>st</sup> stoplight into Waverly Place Shopping Center and follow signs to Whole Foods parking lot. **Please Park in back of lot.**



Thanks to our sponsors:



of Cary



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**Friends of Mark Ornitz**

### Registration Form:

Name: \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone: \_\_\_\_\_

\*E-mail address: \_\_\_\_\_

\*Signature \_\_\_\_\_

Metric Century/Half Century \$ \_\_\_\_\_

Additional BIANC Donation \$ \_\_\_\_\_

Total \_\_\_\_\_

(make checks payable to Capital Cycling Club or Brain Injury Association of North Carolina)

### WAIVER AND ASSUMPTION OF RISK

\* By signing this Release and Waiver, I, for myself, or as a parent or guardian of (name of child participating if under 18), acknowledge that riding a bicycle tour is a potentially hazardous activity, and that there are risks involved in participating. I (or my child) should not enter or ride unless I am (or my child is) medically able and properly trained. I (or my child) agree to abide by all rules and any decision by personnel relating to the rider's(s') ability to participate safely. I (for myself and for my child, if participating) assume all risks with participating in this event, including but not limited to, the effects of weather, rain, heat, traffic, and road conditions, such being known and appreciated by me. Having read and understood this Release and Waiver and in consideration of your accepting my (my child's) entry, I for myself and anyone entitled to act on my behalf, and for my child, if participating, waive my (and my child's) rights to make any legal claim against, or to sue The Capital Cycling Club or any of the sponsors for any injuries or property damage sustained due to participation in this event. It is my intention to release The Capital Cycling Club and all sponsors from all claims and liability of any kind arising out or related to my participation in this event.

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