

UMCA Year-Rounder Challenge



Rider's Name _____ UMCA Number _____
 Street Address _____ E-mail _____
 City, State _____ Country _____

Event Name or Description _____
 Date _____ Distance you rode (at least 90 miles) _____

Division (check)

- | | | |
|---|--|--|
| <input type="checkbox"/> Organized Century
(90-149 miles) | <input type="checkbox"/> Personal Century
(90-149 miles) | <input type="checkbox"/> Indoor Personal Century
(6 hours) |
| <input type="checkbox"/> Organized Long Ride
(150 miles or more) | <input type="checkbox"/> Personal Long Ride
(150 miles or more) | <input type="checkbox"/> Indoor Organized Century
(6 hours) |

Organized Ride Verification	Official's Name _____ Signature _____ Date _____
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Personal Ride Verification	Start Location _____ Time _____ Finish Location _____ Time _____
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Location Store, Road _____	Town, State _____	Time _____	<input type="checkbox"/> AM <input type="checkbox"/> PM	Miles Thus Far _____	<input type="checkbox"/> Receipt Attached (or)
Witness Name _____	Witness E-mail _____				
Location Store, Road _____	Town, State _____	Time _____	<input type="checkbox"/> AM <input type="checkbox"/> PM	Miles Thus Far _____	<input type="checkbox"/> Receipt Attached (or)
Witness Name _____	Witness E-mail _____				
Location Store, Road _____	Town, State _____	Time _____	<input type="checkbox"/> AM <input type="checkbox"/> PM	Miles Thus Far _____	<input type="checkbox"/> Receipt Attached (or)
Witness Name _____	Witness E-mail _____				
Location Store, Road _____	Town, State _____	Time _____	<input type="checkbox"/> AM <input type="checkbox"/> PM	Miles Thus Far _____	<input type="checkbox"/> Receipt Attached (or)
Witness Name _____	Witness E-mail _____				
<input type="checkbox"/> Continued on next page					

Submission: Within 14 days after the event

Send paper submissions to the person below, based on your last name:

- A-C Steven Barnes PO Box 231, Rimforest, CA 92378
- D-G Steven Barnes PO Box 231, Rimforest, CA 92378
- H-O William Beck 17719 Foxmoor Drive, Woodbine, MD 21797
- P-Z Bob Barday 1932 Sage Drive, Golden, CO 80401

Send e-mail and webform submissions to y-rsubmissions@ultracycling.com

Personal Ride Continuation

Rider's Name _____ UMCA Number _____
Street Address _____ E-mail _____
City, State _____ Country _____
Event Name or Description _____
Date _____

Location
Store, Road _____ Town, State _____
Time _____ AM PM Miles Thus Far _____ Receipt Attached (or)
Witness Name _____ Witness E-mail _____

Location
Store, Road _____ Town, State _____
Time _____ AM PM Miles Thus Far _____ Receipt Attached (or)
Witness Name _____ Witness E-mail _____

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Store, Road _____ Town, State _____
Time _____ AM PM Miles Thus Far _____ Receipt Attached (or)
Witness Name _____ Witness E-mail _____