

5TH ANNUAL

TOUR OF THE CHAPELS

COME EXPLORE THE BEAUTY OF NORTHWEST KANSAS AND OUR LOCAL CHURCHES

**JULY 13, 2024
HAYS, KANSAS**

EARLY REGISTRATION DEADLINE: JUNE 21, 2024

RIDE ENTRY FEE: \$45/PERSON

BUS TOUR: \$75/PERSON

FREE T-SHIRT DEADLINE: JUNE 21, 2024

AFTER JUNE 23, 2023 AND DAY-OF REGISTRATION

RIDE ENTRY FEE: \$55/PERSON

BUS TOUR: \$85/PERSON

ON-SITE REGISTRATION OPENS, JULY 13, 6:30 AM

RIDERS WILL RECEIVE A FREE SHIRT • AUTHENTIC GERMAN MEAL AND DRINK TICKETS
CHURCH TOURS OFFERED AT SAG STOPS

HaysAreaBicyclists.org

Hays Area Bicyclists, a 501 (c)3 nonprofit



PREFER A VEGAN BOXED MEAL
(check box if applicable)



Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Age: _____ Date of Birth: _____ Gender (please check) Male: _____ Female: _____ Team (optional): _____

Ride Distance: 15 Mile: _____ 30 Mile: _____ 50 Mile: _____ 62 Mile: _____ 75+ Miles: _____ 54 Mile Gravel _____ Bus Tour: _____

T-Shirt Size (please circle one): XS S M L XL 2XL Emergency Contact: _____ Contact Number: _____

By registering for this event I acknowledge participating is a potentially hazardous activity. I should not enter unless I am medically able and properly trained. I agree to wear a helmet at all times while on my bicycle. I agree to abide by any decision of a race official relative to my ability to safely complete the event. I assume all risks associated with this event including, but not limited to: falls, contact with other participants, effects of the weather, including high heat and/or humidity; traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the City of Hays, Hays Area Bicyclists, and all volunteers, sponsors, and professionals associated with this event from all claims or liabilities of any kind arising out of my participation in this event even though liability may arise out of my negligence or carelessness on the part of the person named in this waiver.

Signature: _____ Date: _____

Parent's Signature (if under 18 years of age): _____

Please make checks payable to Hays Area Bicyclists or Venmo @HaysAreaBicyclists.

Tour die Kapellen Registration Mail To:
Hays Area Bicyclists
P.O. Box 1805
Hays, KS 67601