

CAMP MURPHY CYCLOCROSS CHALLENGE

Sunday
January 17th, 2010
Hobe Sound, FL

This is the final leg of the Florida Council for Cyclocross point's series, where the winners will be announced!

ROAD AND MOUNTAIN BIKERS WELCOME!

Start Time:	Category:	Race:	Prize List	Entry Fee:
8:30-9:45AM	Open Course	-----	-----	
10 A	Kids under 10	Short course	Medals	FREE
10:30 A	Men's 35 - 44	8 laps	Medals/Prizes	\$25.00
	Men's 45+	8 laps	Medals/Prizes	\$25.00
11:30 A	Juniors 10-14	3 laps	Medals	\$5.00
	Women's Beginner all ages	4 laps	Medals	\$20.00
12:15 A	Juniors 15-18	5 laps	Medals/Prizes	\$10.00
	Men's C (Beginner/Cat 4)	6 laps	Medals	\$25.00
1:00 P	Men's B (Sport/Cat 3)	8 laps	Medals/Prizes	\$25.00
	Women (Ex/Sp/Cat 1-3)	8 laps	Medals/Prizes	\$25.00
2:00 P	Men's A (Expert/Cat 1-2)	10 laps	Medals/Prizes	\$25.00



Send Registration to:

Club Scrub

P.O. Box 2263
Jupiter, Fla. 33468-2263

Register online @



Make checks payable to: *Club Scrub*

All proceeds from this event will benefit Club Scrub, a not-for-profit organization supporting Jonathan Dickinson State Park. Our efforts include trail building and maintenance for cycling and other outdoor activities.

- No registration late fees apply, just come out and race.
- Registration opens at 8:30 AM and closes promptly 1/2 hr. prior to race start.
- USCF permit pending
- All USCF rules apply
- \$10 for one day license, pay to USCF
- Promoter reserves the right to combine/cancel events & prize lists.
- Payout will not exceed \$499
- Promoter reserves the rite to modify lap count.
- Mountain bikes allowed - *No bar-ends!*
- **No REFUNDS**

Contact Information:

info@ClubScrub.org

Course Information and map at:

www.ClubScrub.org

How do I get there?

The Jonathan Dickinson State Park is located on U.S. 1 seven miles north of Jupiter and twelve miles south of Stuart. Take I-95 to the Jupiter exit 87A, SR 706 (Indiantown Road). Head east on Indiantown Road until you reach U.S. 1, then head north. The park entrance is on the west side of U.S. 1. After entering the park, make a right at the first stop sign. See map for parking details.

Bib #

Registration form: (Please Print)
Camp Murphy Cyclocross Challenge

Race Category: _____ Registration date: _____

USCF license #: _____

Last Name: _____ First Name: _____

Address: _____ City: _____ State: _____

Zip: _____ Phone: _____

E-mail: _____

Age: _____ Date of Birth: _____ Gender: M or F (circle one)

Total cost: _____

