

# MNGravel160

## Registration Form

Full Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Date: \_\_\_\_\_ Age: \_\_\_\_

City of Residence: \_\_\_\_\_ State of Residence: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

EC Phone Number: \_\_\_\_\_ EC Relationship: \_\_\_\_\_

Gender: Male \_\_ Female \_\_ Non-binary \_\_ Other \_\_

### Event Participation

Cyclist \_\_ Volunteer \_\_

Intended Sleeping Setup: Tent \_\_ Hammock \_\_ Shared Tent \_\_

If sharing a tent, how many people will be using the tent? \_\_\_\_\_

Food Allergies: \_\_\_\_\_

\_\_\_\_\_

Dietary Restrictions: Vegan\_\_ Vegetarian\_\_ Kosher\_\_ Halal\_\_ Gluten Free\_\_

Other\_\_

Please Describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Participants under 18 will require signature from a legal guardian) \*

Legal Guardian Signature: \_\_\_\_\_