



**2006 Wednesday Night Masters Track  
Washington Bowl Velodrome  
Kenosha, Wisconsin  
May 3 – August 30, 2006**

Sponsored by Wisconsin bicycle Racing, ABR Masters 60+ Grant



**Who:** “Masters” Men and Women 30+ divided into 5-year age brackets (30-80+)

**What:** Timed events each evening (100 meters [1/3 lap] to 4000 meters [12 laps].

Events may be run individually or pursuit style (2 riders on track at time, starting on opposite side of track)

Mass start events held each evening (Sprints, Scratch, Handicap, Madison and creative events.

Progressive pace event behind a special motor pacing motorcycle for those who want to increase their top speed and enjoy an excellent workout behind the “motor”.

**When:** Every Wednesday evening beginning around 7pm.

**Where:** “Washington Bowl” Velodrome located in Washington Park in the City of Kenosha, Wisconsin.

From I-94 take Hwy 142 / HWY S (Exit # 340) head east approximately 6 miles to 22<sup>nd</sup> Av to Washington Park. (Entrance to park is on 22<sup>nd</sup> Av just south of the fire station.)

**Why:** **Season Awards:** A chance to win the Wednesday Masters Rider of the Year Trophy (1 place).

There is also a season awards for each category (3 places). Riders will earn points each night for each of the schedule events. Points are awarded on a sliding scale, based upon the total number of riders (irregardless of age/sex) based upon your fastest time. (Example: 12 riders in the 200m TT – fastest rider will earn 12 pts, second fastest will earn 11 pts, ....12th fastest will earn 1 pt. You earn points all year long for both your category and for the overall (min. of 5 nights in order to qualify for the overall and category awards). All riders earn 1 point each night in the progressive pace event for participating.

**Equipment:** Road or Track bicycles for timed events. No shifting for timed events. For Massed start events, Road and Track bike may have their own separate events. For the progressive pace race only track bikes should be used. If allowed by the driver of the motor, road bikes may ride behind the track bikes.

**Registration:** Registration begins around 6:00pm. No advance registration is required. No late fees apply.

Only one “special” ABR release form needs to be filled out for the season.

**Entry Fee:** \$10 per night (Season Pass for Wednesday nights \$100). ABR membership is required.

Memberships available at registration. Annual ABR fee is \$25 and a one-day license is \$4.

**Schedule:** May be adjusted to get the program finished in a reasonable time or if threatening weather is possible.

May 3:	flying ½ lap	flying lap 333m	Unknown Distance
May 10:	flying 200 m	standing lap 333m	Chariot (1 lap)
May 17:	flying 500 m	standing 500m	Team sprint
May 24:	flying 200 m	standing 1500 m	Miss and out
May 31:	flying 200 m	standing kilo	Unknown Distance
June 7:	flying 100 m	standing 2000m	Keiren
June 14:	flying ½ lap	standing lap 333 m	Sprint
June 21:	flying lap	standing 3000 m	Handicap
June 28:	flying 200 m	standing 500 m	Team Pursuit or Team Sprint
July 5:	flying 750 m	standing ½ lap	Miss and Out
July 12:	flying 200 m	standing 4000	Snow Ball
July 19:	flying 500 m	points race	Half lap sprint/ half lap rest/ half lap sprint
July 26:	flying kilo	standing kilo (1000m)	Madison or Points race
August 2:	flying 200m	standing 2000m	Team Pursuit or Team Sprint
August 9:	flying ½ lap	standing 1500m	Handicap elimination
August 16:	flying 200 m	standing 500 m	Pursuit
August 23:	unknown distance	standing 3000m	Points Race
August 30:	flying 200 m	catch and out	1 lap slow race / PARTY - PARTY

Results will be posted at [www.AmBikeRace.com](http://www.AmBikeRace.com) or Kenosha Velodrome Website: [www.333m.com](http://www.333m.com)

**QUESTIONS:** Email: [cewbike@tds.net](mailto:cewbike@tds.net) or call Carl Wilkins at 262-654-6773.

# 2006 ACCIDENT WAIVER AND RELEASE OF LIABILITY 1/05

I acknowledge that this athletic event is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of athletes, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors, and/or producers of the event, and lack of hydration. These risks are not only inherent to athletics, but are also present for volunteers. I hereby assume all of the risks of participating and/or volunteering in this event. I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently trained for participation in the event and have not been advised otherwise by a qualified medical person.

I acknowledge that this Accident Waiver and Release of Liability (AWRL) form will be used by the event holders, sponsors and organizers, in which I may participate and that it will govern my actions and responsibilities at said events.

In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me or my traveling to and from this event, **THE FOLLOWING ENTITIES OR PERSONS:** American Bicycle Racing, Inc., their directors, officers, employees, volunteers, representatives, and agents, the event holders, event sponsors, event directors, event volunteers; (B) indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of any of my actions during this event. I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident and or illness during this event.

I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and or assigns.

This AWRL shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I hereby certify that I have read this document; and, I understand it's content.

Signature of entrant \_\_\_\_\_ ABR Member number \_\_\_\_\_

Name of event **Wednesday Night Masters Kenosha Track May 3 thru August 30, 2006** Today's date \_\_\_\_\_

Name, printed \_\_\_\_\_ Racing club \_\_\_\_\_

Your address \_\_\_\_\_ City, State & Zip \_\_\_\_\_

Your Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Call in case of emergency \_\_\_\_\_ Phone \_\_\_\_\_

Ability Category entered \_\_\_\_\_ or Racing Age Category entered \_\_\_\_\_ Your age \_\_\_\_\_

**I am applying for a One Day Racing Membership in American Bicycling Racing, Inc. (ABR).** A one day license will afford me the chance to race in an ABR event in an equivalent category of any other bicycle racing group to which I now belong. If I do not belong to another bicycle racing group this one day license will afford me the chance to race in an entry level class. I understand and accept the fact that racing a bicycle can be dangerous and will fully accept the risk that may be involved. I wish to forever release ABR, its clubs, employees, members, promoters and sponsors from any liability due to any accidents in bicycle races involving ABR. Signature \_\_\_\_\_

## PARENT GUARDIAN WAIVER FOR MINORS (Under 18 Years Old)

The undersigned parent and natural guardian or legal guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parents or legal guardian.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_