

2008 Tour De Dallas

Northeast:

Sister Grove* **Witness:** _____ **Date:** _____

Arbor Hills **Witness:** _____ **Date:** _____

Rowlett Creek **Witness:** _____ **Date:** _____

Erwin Park **Witness:** _____ **Date:** _____

Northwest:

Johnson Branch* **Witness:** _____ **Date:** _____

Knob Hill **Witness:** _____ **Date:** _____

Horseshoe **Witness:** _____ **Date:** _____

Isle du Bois **Witness:** _____ **Date:** _____

Northshore **Witness:** _____ **Date:** _____

South:

Oak Cliff* **Witness:** _____ **Date:** _____

Cedar Hill* **Witness:** _____ **Date:** _____

Boulder Park **Witness:** _____ **Date:** _____

L.B.Houston **Witness:** _____ **Date:** _____

Windmill Hill **Witness:** _____ **Date:** _____

River Legacy **Witness:** _____ **Date:** _____

***required trails**

Tour De Dallas is a program to get people to ride different **DORBA** trails every year. **Rewards** are a T-shirt and a certificate (certificate only if you ride all 15 trails). **Requirements:** ride a minimum of seven trails; must ride two trails in each region (**Northeast, Northwest** and **South**); must ride **Sister Grove, Johnson Branch, Cedar Hill** and **Oak Cliff**; must ride between **Dec. 1st '07** and **Nov. 30th '08** and send in completed form by **November 30th**. **Cost** is **\$10** (make check payable to **DORBA**).

Full Name (print): _____ **Member #** _____ **T-shirt Size:** S M L XL XXL

E-mail address: _____ **Phone #** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

I, the undersigned recognized that mountain biking may be a dangerous and will take all precautions to prevent personal injury and/or property damage to both myself and others. I will not volunteer nor partake in any activity that could result in an injury to myself, personal property or others. By signing this form, I hereby release DORBA, its officers, members, representatives, organizers, sponsors, ride leaders and land owners from liability for injury to myself or damage to my property as a result of participating in this event. Further, I understood I am responsible for keeping myself well hydrated at this event and also I am required to wear a helmet and maintain control of my bike at all times while participating in this event.

Signature: _____ **Date:** _____

Return completed form along with registration fee (**\$10**) - no later than **November 30th** to:
Tour De Dallas c/o David Hermon, 1721 E Frankford #513, Carrollton, TX 75007
more info see www.dorba.org