

# World Human Powered Speed Challenge

## Battle Mountain, Nevada USA

### September 14 - 19, 2015

Name(s) \_\_\_\_\_

Name of vehicle/ team \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

Emergency Contact Name and Cell Number \_\_\_\_\_

Description of vehicle \_\_\_\_\_

Builder(s) \_\_\_\_\_

Rider (s) Name, age, sex \_\_\_\_\_

New vehicle? Yes \_\_\_ No \_\_\_ New rider? Yes \_\_\_ No \_\_\_ Years attending \_\_\_\_\_ MPH Hat earned \_\_\_\_\_

Current member IHPVA? Yes \_\_\_ No \_\_\_ Don't Know \_\_\_ Current member ABR? Yes \_\_\_ No \_\_\_ Don't Know \_\_\_

All riders, builder/ owners, team advisor /manager must be a current IHPVA member.

ABR membership and insurance for riders only. Memberships run from 12 months from application date.

Please fill out membership forms (IHPVA & ABR) for each new member. All riders must fill out and sign ABR form

**Fees:**

**Single entry 1 rider** : 300.00\_\_\_\_\_(includes 1 free T-shirt & poster ) Size: S\_M\_L\_XL\_Men/ Women Total\_\_\_\_\_

**Additional rider(s)** X 100.00\_\_\_\_\_(includes 1 free poster per rider) Total\_\_\_\_\_

**T-shirt(s)**\_\_\_\_ X 20.00=\_\_\_\_\_ # Men's\_\_\_\_ # Women's Total\_\_\_\_\_

Size (how many each size): S\_\_\_ M\_\_\_L\_\_\_XL\_\_\_ (Larger sizes by request add 2.00)

**Poster(s)**\_\_\_\_ X 3.00 Total\_\_\_\_\_

**IHPVA Membership:** US/Canada \_\_\_X 32.00\_\_\_ all other countries\_\_\_X 37.00 Total\_\_\_\_\_

**ABR Membership:**\_\_\_\_X 25.00 Junior:(under18)\_\_\_\_X 10.00 Senior: (over 80)\_\_\_\_X Free Total\_\_\_\_\_

**Insurance**\_\_\_\_ X 20. 00 Total\_\_\_\_\_

**Early Registration deduction:** (1 per application) -25.00

Balance due \_\_\_\_\_

Applications received by August 20, 2015 get 25.00 discount.

Do not mail application after Aug 25, 2015. Emailed forms OK until Sept 10, 2015

Cancellation after September 1, 2015 will result in the loss of all fees.

fax, mail or email this application, make checks payable to:

IHPVA  
2338 18th St Eureka, CA 95501  
Ph 707-443-8261 fax 707-444-2579  
email: a.krause@sbcglobal.net

Card # \_\_\_\_\_  
Expiration Date \_\_\_\_\_ Security code \_\_\_\_\_ Zip Code \_\_\_\_\_  
Name on Card \_\_\_\_\_  
Signature \_\_\_\_\_  
email for receipt: \_\_\_\_\_