

SOUTHERN INDIANA WHEELMEN

ACTIVITIES SCHEDULE (HELMETS REQUIRED)

Terran rating: #1=Flat, #2=Flat with a few hills, #3=Moderately hilly, #4=Hilly

Support Level: min=Route Directions med=Directions & Captain rides with slower riders max=Full sag support

March 2000

DATE	TIME	MILES	#*	PLACE	CAPTAIN	NUMBER
Wed 1	10:00am	25/35	3med	930 Franklin St.	Alison Ewart	584-4222
Sat 4	10:00am	25/50	3med	Memphis Travel Plaza	Dick Williams	426-4844
Sun 5	10:00am	20/40/60	3min	Memphis Travel Plaza	Bob Peters	948-BI KE
Wed 8	10:00am	25/50	3med	Memphis Travel Plaza	Dick Williams	426-4844
Sat 11	10:00am	25/50	3min	Wilson School	Kyle & Carrie Baker	284-4708
Sun 12	10:00am	20/35	3min	Edwardsville Park	Ron & Malvery	944-2762
Sun 12	2:00pm	25	3min	Silver Creek High School	Kyle & Carrie Baker	284-4708
Wed 15	9:30am	25/35	3med	102 Pope Street	Emily Boone	585-3430
Sat 18	10:00am	60	3min	Memphis Travel Plaza	Ken Rieger	294-1935
Sun 19	10:00am	20/40/60	3min	Memphis Travel Plaza	Bob Peters	948-BI KE
Wed 22	9:30am	35	3med	I roquois Park	Sonny Neurath	893-2306
Thur 23	7:15pm	<u>S.I.W. Club Meeting</u>		(Clarksville Library—Behind Pep Boys)	Paul Beach	283-8335
Sat 25	10:00am	25/50	3med	Memphis Travel Plaza	Dick Williams	426-4844
Sun 26	9:00am	45	3min	Wilson School	Dick Keith	283-5156
Wed 29	9:30am	40	3med	Greenville Elementary School	Alison Ewart	584-4222

SIW Membership Application

New Membership Single \$9.00

Renewal Family \$12.00

NAME(S) _____

ADDRESS _____

CITY _____

PHONE _____ E-Mail _____

The undersigned understands that bicycling upon public roads contains a certain element of danger and that if negligence of the operator or other individuals should occur, then I may be injured. I understand that there are activities of the Southern Indian Wheelmen where if I am fortunate enough to have no misfortunes occur, I should be able to receive quality bicycling time and positive reward. The Southern Indiana Wheelmen agree to elect Responsible officers and make positive to do organized planing of events, I hereby understand that despite their best efforts, I may receive injuries and as a result I am willing to accept the risk of injury in order to participate in those events and I understand that I make no claim against Southern Indiana Wheelmen, and I understand the general risks involved in participating in a bicycling event.

SIGNED _____ SIGNED _____ DATE _____

Members under 18 must have this signed by a parent or guardian. Mail application with a check payable to
Southern Indiana Wheelmen, 111 W. Hwy. 131, Clarksville, IN 47129