

Meadows Mountains Mileage Registration Form

Please register all participants ages 6+.
Fee includes one (1) t-shirt and race refreshments.

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Address _____

City, State, Zip _____

E-mail _____

Phone _____

T-Shirt (indicate total of each size needed)

Youth __XS__S__M__L__XL

Adult __S__M__L__XL

Fees

#adults(11+) _____ x \$10 = \$ _____

#children(6+) _____ x \$7 = \$ _____

Total _____

Payment (full payment required)

Check (make payable to Leoni Meadows)

Credit Card - MC/VS/DC

Card# _____ Expires _____

Signature _____

Mail to: Leoni Meadows
PO Box 400
Grizzly Flats CA 95636

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