

Record Attempt Summary

This form must be submitted within 14 days of the completion of the record attempt with an attached map showing the record route.

General Information:

Date of Start: mm ___ dd ___ yy _____ Time of Start: hh ___ mm ___ a.m. p.m.

Date of End: mm ___ dd ___ yy _____ Time of End: hh ___ mm ___ a.m. p.m.

Total Elapsed Time: dd ___ hh ___ mm ___

For Cross-Country/Cross-State/Point-to-Point/Capital-to-Capital Attempts:

Describe starting and ending point *exactly*, so that the WUCA Records Chair or another rider may locate the starting and ending points correctly. Attach map with route highlighted or a route sheet.

Starting Point: _____

Ending Point: _____

Total Miles: _____ Number of Road Log Sheets: _____ Route Attached

For Track or Road Course (Surveyed) Attempts:

Track Location: _____

Track Circumference (one lap): _____ miles km

Number of Laps Ridden: _____ Number of Track Log Sheets: _____

Total Distance: _____ miles km

Signatures of All Riders

We the **riders** declare that I/we have ridden this record attempt fairly and in accordance with the Rules governing WUCA Record Attempts and that the above Record Attempt Summary is correct.

(rider signature) (printed name) (date)

(rider signature) (printed name) (date)

(rider signature) (printed name) (date)

(rider signature) (printed name) (date)

Signatures of All Officials

(official signature) (printed name) (date)

(official signature) (printed name) (date)

(Continue overleaf if more riders or officials)