

Challenge Champions

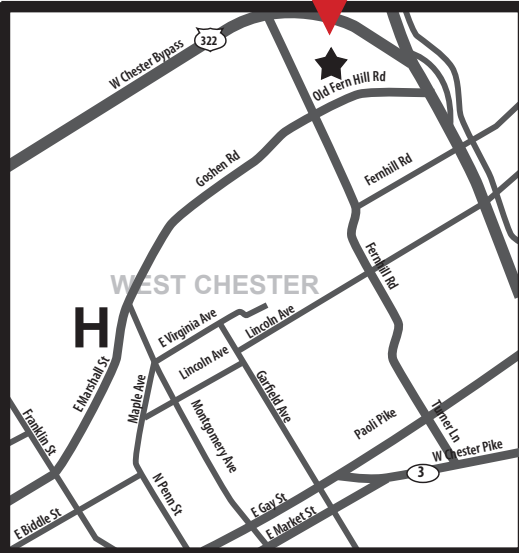
Follow the video diary of five survivors on the road to good health. Also watch tips from our experts on how to get in shape, give back and become a Challenge Champion yourself.

www.CCRRide.com

Special thanks to our Challenge Champion partners:

- ACAC Fitness & Wellness Centers
- LA Fitness of Downingtown and Pottstown
- Mitch's Market Street Gym
- YMCA of the Brandywine Valley

LOCATION!
Fern Hill Medical Campus
 915 Old Fern Hill Road
 West Chester, PA 19380



The Chester County Challenge for Cancer

Bike Tour

65
MILES

50
MILES

25
MILES

10
MILES

5
MILES

Sunday, June 17, 2012

Sponsors:
 National Penn Bank
 Infusioncare
 J&L Building Materials
 Morrissey Family Foundation
 Chester County ARES/RACES

Part of The Chester County Hospital
 May Festival

www.cccride.com

Benefits:  **THE CHESTER COUNTY HOSPITAL** and Health System

Presented By:  **Infusioncare**

WHO

Avid and recreational riders of all ages.

WHAT

5, 10, 25, 50, and 65 mile non-competitive bike tours through beautiful Chester County.

WHERE

Tours kick off at the parking lot of the Fern Hill Medical Campus
 915 Old Fern Hill Road, West Chester

WHY

Proceeds benefit The Cancer Program of The Chester County Hospital and Neighborhood Hospice.

WHEN

June 17, 2012

7:30 am Registration
 8:00 am 65, 50, and 25 mile rides
 9:00 am 5 and 10 mile rides

www.cccride.com



Become a fan of The Chester County Hospital's Facebook page to receive updates on events like this as well as health tips, nutritional recipes and much more:
www.facebook.com/ChesterCountyHospital.

The Chester County Challenge for Cancer Bike Tour

PRESENTED BY:

Infusioncare



PLATINUM SPONSORS

J&L Building Materials, Inc.
 Morrissey Family Foundation

GOLD SPONSOR

Elmark Packaging, Inc.
 Pellini Gold Cordes

PROUD SPONSORS

Allos Therapeutics, Inc.	Liberty Tax Service
ARENA SNYDER & DUNLAP, LLP	M2VP, Inc
Bike Line	Med-Trans, Inc.
Cargo Solutions, Inc.	Mr. and Mrs. Robert Rogers
Chester County Cardiology Assoc.	Parkway Center
Chester County Amateur Radio	TGS Financial Advisors
Coins of Chester County	The Protection Bureau
Chester County Hematology Oncology	Thomas Chevrolet, Inc
Gateway Medical Associates	Tolsdorf Oil Lube Express
Greater West Chester Sunrise Rotary	Visiting Angels of Chester County
Integral Nuclear Associates, LLC	West Chester Cycling Club
Legacy Planning Partners	

EVENTS OF THE MAY FESTIVAL ARE BROUGHT TO YOU BY:



www.DailyLocal.com



The Chester County Challenge for Cancer Bike Tour

A fun, meaningful way to celebrate Father's Day!

Starting Place Fern Hill Medical Campus
NEW LOCATION! 915 Old Fern Hill Road, West Chester

Starting Times Sunday, June 17, 2012: *Celebrate Father's Day!*

7:30 am Registration opens (rain or shine)

8:00 am 65 mile ride Challenging, hilly
 50 mile ride Challenging, hilly
 25 mile ride Hilly

9:00 am 10 mile ride Moderate hills
 5 mile ride Flat, escorted by local police

**ALL 25, 50 AND 65 MILE RIDERS MUST BE ON COURSE
 NO LATER THAN 9:00 AM**

The Chester County Challenge for Cancer Bike Tour is a part of the Annual May Festival Fundraising Events.

For more information about the May Festival, please visit www.chestercountyhospital.org/mayfest.



Registration Fees:

Before 5.31.2012 Individual \$30 *Family \$40
 Starting 6.1.2012 Individual \$35 *Family \$45
 Teams \$250 for 10 riders *2 adults + unlimited children (Limit 2 free T-shirts)

Tour Support and Amenities:



- Refreshments at rest stops and start/finish
- SAG vehicles – provided by Thomas Chevrolet, Inc.
- Tour Support – provided by Bike Line, West Chester Cycling Club and Chester County ARES/RACES
- Cue sheets, ample road markings, road marshals
- Free Challenge T-shirt to all adults pre-registered by 6.1.12
- Helmet fittings and bike safety checks



Online registration and route maps available at cccride.com

The Chester County Challenge for Cancer benefits:



The Cancer Program at The Chester County Hospital
 A service of The Chester County Hospital and the Abramson Cancer Center of the University of Pennsylvania

Neighborhood Health
 Part of The Chester County Hospital and Health System

For more information visit www.cccride.com or call 610.431.5329.

Registration Form

Name (Adult #1): _____
 Address: _____
 City: _____
 State: _____ Zip: _____
 Phone: (daytime) _____
 Email: _____

Family Participants
 Adult #2: _____
 Child #1: _____ Child #2: _____
 Child #3: _____ Child #4: _____

Team
 Team Name: _____
 1: _____ 6: _____
 2: _____ 7: _____
 3: _____ 8: _____
 4: _____ 9: _____
 5: _____ 10: _____

T-Shirt Size: Please specify the quantity of each size shirt below:
 Adults Sizes Only: ___S___M___L___XL___XXL

Registration fee \$ _____
 Additional shirts (\$10 ea.) \$ _____
 I am unable to participate but would like to donate \$ _____
Total enclosed \$ _____

Checks payable to: The May Festival
Mail to: The Chester County Challenge c/o Arena Snyder
 728 Springdale Drive, Exton, PA 19341

In consideration of acceptance of my/my family's entry, I/we, for myself/ourselves, my/our executors, administrators and assignees, do hereby release and discharge The Chester County Hospital, The Cancer program of The Chester County Hospital, Neighborhood Hospice, the May Festival Committee and ride officials and organizers of all claims and damages and action whatsoever in any manner rising out of participation in said bike ride. I/we attest and verify that I/we have full knowledge of the risk involved in this event, that I/we are physically fit and sufficiently trained to participate in this event, and that my/our bicycle equipment is in good working order. I/we agree to wear a helmet and obey all motor vehicle laws.

Signature: _____

Team Registration

There are two ways to participate as a team:

1) Team + Personalized T-shirts
 Organize your office, family or friends into a team to enjoy the ride. In addition to the per rider team rate of \$25, a team registration fee of \$100 is required. This fee includes the price of printing set-up for the personalized shirt. Once the team registration fee collected, we will post your team name on the Ride's registration page so that your team may register online.

TEAM NAME _____

Team fee: \$100 + registration fee of \$25/rider

Please have your team information complete by May 1 to ensure that your shirts arrive on time. Printing will be done in a one-color process. You may provide your own design for a 6 inch by 6 inch space. The design should be submitted as a 300 dpi jpg or high resolution pdf. This is a family event. All designs must be approved by event staff for appropriateness.

2) Team Registration
 If you wish to organize a team of 10 or more individuals without personalized T-shirts, please contact Tom Gavin at TGavin@cchosp.com or call 610.431.5329. We will post your team name on the Ride's registration page so that your team may register online for a fee of \$25 each.

*** INTERESTED IN VOLUNTEERING AT THE CHALLENGE OR OTHER AREAS OF THE MAY FESTIVAL? CALL 610-430-2906**