Permit #	
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Promoter

RC/Local Association\_

USAC Authorized Signature\_

## **USCF COMPETITIVE EVENT PERMIT APPLICATION**

1 Olympic Plaza, Colorado Springs, CO 80909-5775 • ph: 719/866-4581 • fax: 719/866-4628 • http://www.usacyclinq.orq For competitive events only. Applications must be submitted no later than six weeks in advance of the event date to USA Cycling, Inc. **EVENT NAME** INSURED DATE(S) EVENT DATE(S)\_ USCF EVENT TYPE ROAD + TRACK □ NRC Road Race □ Track Race Other □ STATE Criterium Series Race Collegiate ☐ LOCAL Cyclocross □ Time Trial ■ Stage Race ■ Amateur Only ☐ Open (Pro-Am) **EVENT INFORMATION** PLEASE PRINT **EVENT LOCATION** SPONSORING USA CYCLING MEMBER CLUB(S) [UP TO 5 CLUBS] **EVENT ORGANIZER EVENT WEBSITE: ADDRESS** STATE CITY ZIP TELEPHONE NO. ( FAX NO. ( ) E-MAIL **PERMIT FEE WORKSHEET** For all USCF permitted events. CANCELLATION OF EVENT WILL RESULT IN A \$50 FEE. **EVENT HIGHEST PAY-OUT USCF PERMIT FEE** COLLEGIATE COLLEGIATE PERMIT **CATEGORY** for any one category **PERMIT FEE EVENTS FEE PER DAY** Α \$10,000+ 7% of <u>total</u> prize list Collegiate Only \$25 per day \$5,000 - \$9,999 7% of total prize list Event B pay standard USCF \$2,000 - \$4,999 7% of total prize list Collegiate + Open \$500 - \$1,999 to USCF Riders D event fee only \$50 per day \$0 - \$499 \$25 per day **RACE SERIES PERMIT** A race series is a sequence of race meets of the same kind (road, criterium, time trial, etc.) conducted on a regular basis at the same location, time and day of the week. A prize list of less than \$499.00 per day may be offered. Fee: 1-3 days - \$15.00, 4-30 days - \$50.00. All riders must be licensed and sign waivers. Promoters pay \$2.00 (per rider per day) insurance coverage. **PERMIT FILING PENALTIES (if applicable)** PERMIT FEE FORMULA Permit fee = For Categories A, B and C: Total prize list = \$\_\_\_\_\_ x 7% = \$\_\_\_\_ = Permit Fee Late filing fee (within 6 weeks of event) + \$50 For Category D: Number of days \_\_\_\_\_ x \$50 = \$\_\_\_\_ Rush filing fee (within 2 weeks of event) + \$100 For Category E: Number of days \_\_\_\_\_ x \$25 = \$\_\_\_ = Permit Fee TOTAL PERMIT FEE DUE: INSURANCE SURCHARGE is \$2.00 per rider per day for all USCF events and must be submitted in full with post event report. to insurance and reporting obligations, your Post-Event Report, race results and subsequent paperwork must arrive at USA Cycl rwork must be sent in after each race in a series of races. Additional service fees will apply to all late filings: \$50 if within 15-30 da if within 61-90 days of event. After 60 days you may face future permit cancellations/suspensions. Please avoid this and remit all Form of payment: ☐ Check ☐ Money Order ☐ VISA ☐ MasterCard Credit Card #: Expiration Date: Signature: Cardholder Address: Cardholder Name: I, the undersigned, a club officer being a duly authorized agent of the above listed club, having read the information in the accompanying permit guide, agree to the same, and agree to abide by and enforce the rules, regulations and decisions of USA Cycling, Inc. and its member associations. The club agrees to defend, to hold harmless and to indemnify USA Cycling, Inc. and its member associations against any and all costs, claim, legal expense and liabilities which are connected with or arise directly or indirectly out of the preparation for or conduct of the above event(s); to cooperate with USA Cycling, Inc. and its agents in the event of any personal injury or other claims and/or other legal action(s) arising out of the above event(s) and to make available at all times to USA Cycling, Inc. It is understood and agreed that USA Cycling, Inc. makes no warranties, expressed or implied, to the club or club officer, to entrants, competitors, or spectators, or to any other person. USA Cycling, Inc. and its member associations are not promoting organizations. I understand any permit issued by USA Cycling, Inc. is not assignable to another event. USA Cycling, Inc. will have access to all data should my event use Active.com for online registration.

\_\_\_\_\_State\_\_\_\_\_\_Date\_\_\_\_

DISTRIBUTION: WHITE - USAC YELLOW - INSURANCE PINK - RC/LA GOLD - PROMOTER

By signing this form, I agree that I am responsible for all insurance surcharges and race fees due to USA Cycling.

Date

Date