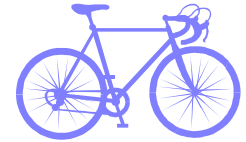


The 13th ANNUAL CORY'S RIDE



www.corysride.com

June 4, 2011

A ride to benefit the Anchor House Cory C. Golis Memorial Scholarship Fund.

A time to meet and socialize with friends and other bike riders.

A day to remember and honor Cory Golis.

ROUTES: 10, 20, and 50 mile routes.

LOCATION: Start and end at Tall Cedars Picnic Grove, Crosswicks, New Jersey

STARTING Day of event registration 7-9:30 AM

TIMES: Suggested departure times: 7:30 for 50 miles, 9:00 for 20 miles, & 10:00 for 10 miles

COST: Pre-registration fee: \$30.00 (Deadline 5/16/2011) Same day registration fee: \$35.00

Commemorative T-shirt for pre-registered riders

Post-ride picnic from 11:30 to 2:00 PM

SUPPORT: Cue sheets with registration.

SAG stop on 50 mile route. Rovers will be on routes with cell phones.

ALL PARTICIPANTS MUST BE AT LEAST 18 YEARS OF AGE

Application Form

Name: _____ Address: _____

Email address: _____

_____ Phone: _____ Emergency Contact:

_____ Phone: _____

Mail completed application and check made out to: Anchor House Foundation to:

Anchor House Foundation, Cory's Ride, P.O. Box 2357, Trenton, NJ 08607

Deadline for pre-registration: May 16, 2011

Route: 10 mile 20 mile 50 mile Shirt size: M L XL XXL

Fee: \$30 \$35 Additional contribution: \$ _____ I can't ride but wish to contribute: \$ _____

\$PARTICIPANT RELEASE - PLEASE READ BEFORE SIGNING

In consideration of the acceptance of my entry, I, the undersigned, do hereby for myself, my heirs, executors, administrators or assigns, waive, release and forever discharge any and all rights and claims I may have against Anchor House, Inc., the Anchor House Foundation, the officers, members, sponsors, and any other persons connected with Cory's Ride, for any liability from any injury, illness or death sustained as a result of my participation in any activities associated with this ride. I also agree to wear an ANSI-approved bicycle helmet while biking on Cory's Ride. I understand that I must be at least 18 years of age to participate in Cory's Ride.

Participant Signature: _____ Date: _____