**About The Ride**
Come enjoy the low-traffic, gently rolling roads of Union County, on the way to historic covered bridges. The 34, 63 and 73 mile routes will include visits to four of Union County’s most beautiful historic covered bridges. The 19 mile route will include one bridge.

**Location & Start Times**
The event will begin at Edgewood Elementary School, 203 Grove Street, Marysville Ohio. "Day of" registration will begin at 7:30 AM as will the "rolling start."

**Big Darby Plains Scenic Byway**
Parts of all four of our routes include sections of the Big Darby Plains Scenic Byway. The Byway features historic covered bridges, century farms, cemeteries, homes of interest, and access to the National and State designated “Scenic Waterway”...The Big Darby Creek. By all accounts this is some of Ohio’s most beautiful countryside!

**Supported Stops**
A rest stop featuring healthy snacks (thank you, Union County Health Dept.) will be located at the end of the North Lewisburg Trail.

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**About the Union County Foundation**
All proceeds benefit the Union County Foundation. The Foundation was founded in 1993. It is a not-for-profit community foundation based in Marysville, Ohio. We serve Union County by helping individuals, families, businesses, and organizations to accumulate and distribute charitable funds for the betterment of the community. Over the last 10 years we have disbursed in excess of $5,697,000 to charitable causes in and around Union County, and over $1,470,716 of scholarships in the last 15 years.
Registration
You can pre-register now through Friday, August 23rd, 2019. Registration is $20 per rider. The first 100 registered riders will receive the Official UCF Covered Bridges Tour patch. Day of Ride registration will be $25 per rider.

Please mail your registration form (included in this flyer) to Union County Foundation, PO Box 608 Marysville, OH 43040. Online registration will be available through Friday, August 23rd at www.unioncountyfoundation.org.

Safety and SAG Support
All cyclists are required to wear an approved helmet while riding their bicycles. Children under the age of 14 must be accompanied by an adult during the event.

All riders are expected to obey all traffic laws. The roads and trails are open to traffic, and all participants accept the risks of participating in events on open roads and trails. This event will take place rain or shine.

Be sure your bike and body are in condition to complete the ride.

A manned SAG support vehicle will be provided by ride volunteers and available should you need assistance.

The Fifth Annual UCF Bridges Tour is part of the Union County Grand Prix Series

Registration Form
Please complete a separate registration form for each rider. Register online at www.unioncountyfoundation.org

Name: ____________________________________________________________

Address: __________________________________________________________

City, State, Zip: ___________________________________________________

Phone: ___________________________ Date of Birth: ___________________

eMail: ____________________________________________________________

- Ride Selected: [ ] 19 mile [ ] 34 mile [ ] 63 mile [ ] 73 mile

- Day of Ride Registration Fees: $25.00 / rider

- Pre-Registration Fees (Received by Aug. 23rd): $20.00 / rider

- Total Amount Included: ________________________________

Make checks payable to the Union County Foundation.
Mail your completed registration to Union County Foundation, PO Box 608, Marysville, OH 43040.

Release: In signing this form for myself or named entrant (if under the age of 18) I acknowledge that I understand the intent hereof, and I hereby agree to and will absolve and hold harmless the Union County Foundation, its staff, agents and any other parties connected with this event in any way whatsoever, singly and collectively, from and against any blame or liability, misadventure, harm, loss, inconvenience or damage suffered or sustained as a result of participation in the Union County Foundations Covered Bridges Tour or in any activities associated therewith. I also hereby consent to and permit emergency treatment in the event of injury or illness. I shall abide by traffic laws and regulations and practice courtesy and safety in cycling.

X _________________________ Date:__________
Signature (above)

X _________________________ Date:__________
Signature of Parent for riders under 18 (above)