



Four Winds Traditional Adventure Races include:

The Supreme Adventure Race

Mountain Rage

Urban Rage

Application Form: Return this form with a deposit to initiate registration for team entry into the current years Four Winds Adventure Races. A deposit serves to reserve a team spot in the specified race event. Send one copy and the required early registration deposit for each race:

**Four Winds Adventures LLC, 2675 W. Hwy. 89A, # 451,
Sedona, AZ 86336 Phone: 1-800-775-7671 fax: 1-888-844-7671**

Select race (circle one):

Supreme Adventure Race

Mountain Rage

Urban Rage

Team name: _____ Today's Date: _____

Individual team members as of date submitted:

1. Team Leader: _____
Name _____ M/F _____ Age _____

Phone (Day) _____

Phone (Night) _____

E-mail Address _____

FAX _____

Street Address _____

City, State, ZIP _____

2. Team Member: _____
Name _____ M/F _____ Age _____

Phone (Day) _____

Phone (Night) _____

E-mail Address _____

FAX _____

Street Address _____

City, State, ZIP _____

3. Team Member _____
Name _____ M/F _____ Age _____

Phone (Day) _____

Phone (Night) _____

E-mail Address _____

FAX _____

Street Address _____

City, State, ZIP _____

Individual team members (continued):

4. Team Member: _____

Name	M/F	Age
Phone (Day)	Phone (Night)	
E-mail Address	FAX	
Street Address		
City, State, ZIP		

Support Team Members:

1. Support Member: _____

Name	M/F	Age
Phone (Day)	Phone (Night)	
E-mail Address	FAX	
Street Address		
City, State, ZIP		
2. Support Member: _____		
Name	M/F	Age
Phone (Day)	Phone (Night)	
E-mail Address	FAX	
Street Address		
City, State, ZIP		

Optional Team Reporter/Photographer:

3. Member: _____

Name	M/F	Age
Phone (Day)	Phone (Night)	
E-mail Address	FAX	
Street Address		
City, State, ZIP		

You can help us make this a better race experience for you by answering the following questions:

1. Has this group ever raced as a team before, if so when?

2. Which team members have done any adventure races, which races, when?

3. What are team goals for the race event?

4. Would the team be interested in race preparation events, and if so, what kind?

5. What does the team expect from the race event?

6. Based on past experience or information, what are the most important aspects of the race that will make this a successful experience for the team?

Thank-you for your application. Please be sure and enclose your deposit payable to:
The Four Winds Adventures LLC
2675 W. Hwy 89A, # 451
Sedona AZ 86336.
This reserves a team spot.

Deposit amount enclosed: _____
Please do call us anytime for questions at 800-775-7671 Fax 888-844-7671.