

YRE/SEASONAL EVENT INFORMATION

YRE Stamp Number (if renewing): _____ **AVA Number:** _____

Medals Available: () A Award () B Award () Credit Only () Other _____

Directions to Start Point (please include from nearest large city): _____

Start Point Hours of Operation: _____ **Days Closed:** _____

<p>Alternate Start Point (if applicable) Name & Address: _____</p> <p>Number (if you want it listed): _____</p> <p>Directions to Alternate Start Point: _____</p> <hr/> <hr/> <hr/> <hr/> <p>Hours of Operation: _____ Days Closed: _____</p> <hr/> <hr/>
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Trail Rating: _____ **Pets Allowed:** () Yes () No

Special Requirements for pets: _____

Suitable for strollers and/or wheelchairs: _____

Discounts given to volkssporters: _____

Special Instructions: _____

Trail Description (we will use as space allows): _____
