

INNER CITY CYCLING CONNECTION, INC.

A 501 C(3) NON-PROFIT ORGANIZATION



Inner City Cycling Connection



THE MARTIN LUTHER KING JR.

BICYCLE RACE, BIKE FESTIVAL, AND HEALTH FAIR EXPO

**PROPOSAL TO
GRANT/SPONSOR PROVIDER**

Presented By
Donald Harris, President (IC3)

Website: www.innercitycycling.org

*Celebrating The Dream
Through Cycling*

West
LA COLLEGE





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COMPANY BACKGROUND

- ❑ INNER CITY CYCLING CONNECTION, INC. (IC3) IS A NON-PROFIT ORGANIZATION DEDICATED TO PROMOTING CYCLING IN OUR INNER CITIES
 - ❑ IC3 has been in existence for over 10 years
- ❑ IC3 HAS BEEN PERFORMING THE ANNUAL MARTIN LUTHER KING JR CLASSIC BIKE RACE AND FESTIVAL IN LOCAL METRO AREAS THE PAST 12 YEARS
- ❑ PROJECTED FOR THE YEAR 20XX, IC3 IS REQUESTING WEST LOS ANGELES COLLEGE TO BE THE OFFICIAL VENUE FOR THE 13th ANNUAL MARTIN LUTHER KING JR. CLASSIC BIKE CRITERION RACE, FESTIVAL, AND HEALTH FAIR EXPO





MARTIN LUTHER KING JR CLASSIC BIKE RACE AND FESTIVAL PROPOSAL TO WEST LA COLLEGE



- PROPOSED DATE AND PROPOSAL PARTICULARS
 - Requested Date --- January Sunday XX, 20XX
- RACE PARTICIPANTS
 - 1500 Cyclists
 - Cyclists for Europe, South America, and other countries attend our race and festival
 - 3000 to 10,000 Spectators
- BENEFITS TO WEST LA COLLEGE
 - International exposure of West LA College to a wide, diverse audience
 - Official college logo on all race and festival promotional material
- BENEFITS TO CULVER CITY
 - Increased Culver City revenues due to event, ie Lodging, Restaurants, Tourism to local activities, Downtown Culver City, etc



Inner City Cycling Connection

WEST LOS ANGELES COLLEGE COURSE LAYOUT



LEGEND

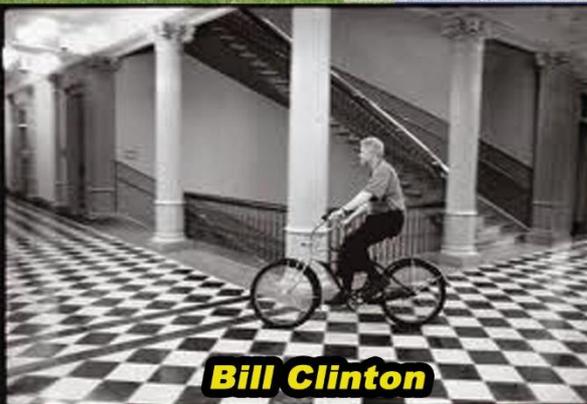
-  Bike Route
-  Barricades
-  Awards/Vendor Booth Area (See Next Page For Layout)
-  Start Finish Area
-  Cyclist Staging Area



Barack Obama



Jimmy Carter



Bill Clinton

OUR PRESIDENTS CYCLING



EVENT CALENDAR

SUNDAY, JANUARY 17, 20XX

Street Closure from 6:00 am to 2:00 pm

Registration: 7:00 am – 15 minutes prior to each race

1 st race starts at 8:00 am	Cat 4/5	40 min
2 nd race starts at 8:50 am	Cat 3	50 min
3 rd race starts at 9:50 am	Women ½	50 min
4 th race starts at 10:50 am	Masters 35+	50 min
5 th race starts at 11:50 am	PRO ½	90 min

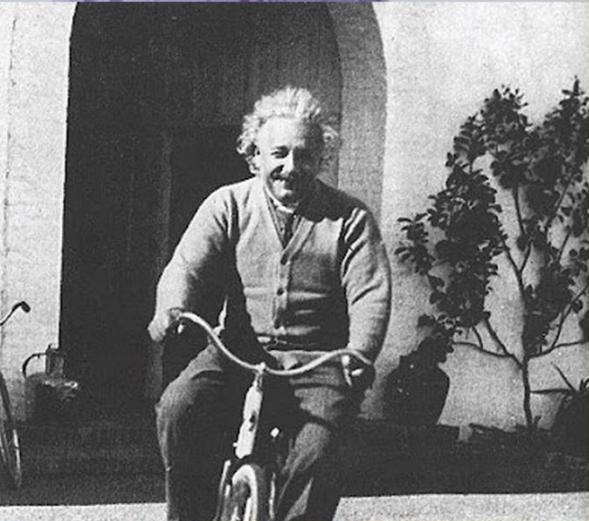
Awards & Recognition Ceremony 2:00 pm

Community Bike Demonstration 2:00 pm to 6:00 pm

- ❖ This will involve showing kids proper cycling techniques and bike maintenance
- ❖ Amateur bike racing contest among local elementary and high school students
- ❖ BMX bicycle tricks exhibition
- ❖ Community coolest bicycle display



Inner City Cycling Connection



VENDOR BOOTH LAYOUT

Presentation Stage

10x10 Vendor Booths

Arts, Food, Craft
Bike/Health Fair
Expo Booths

10x10 Vendor Booths

First Aid Station

Registration Area

Sheriff Station



Inner City Cycling Connection
A 501(C3) Non-Profit Organization

P.O. Box 82311
 Los Angeles, CA 90082

Office: (323)839-5012 Fax: (323)291-2582 Email: donic3e@yahoo.com
www.ic3cycling.com

OFFICE USE ONLY	
Review By	_____
Race Number	_____
Status	_____
Other Info	_____

Applicant Registration Information (Fee - TBD)

MARTIN LUTHER KING JR. CLASSIC BIKE RACE AND FESTIVAL INFORMATION

APPLICANT INFORMATION (Please Print Clearly)

Applicant Name	_____		
	Mr./Ms./Mrs.	First Name	Last Name
Mailing Address	_____		
	Address	Street	Apt. #
Contact Information	City	State	Zip Code
	() --	() --	() --
	Day Time Phone No.	Evening Phone No.	Cell Phone No.
	Fax No.: () --	_____	
	Email Address: _____		
Birthdate	_____		
Returning Racer	Yes []	No []	
Previous Year(s) Of Participation	_____		
Are there any medical conditions Inner City Cycling Connection, Inc. needs to be aware of?	_____		

PLEASE PROVIDE EMERGENCY CONTACT INFORMATION

Dr. Name:	Dr. Phone No:	Medical Issues:
Name:	Phone No:	Relationship:
Name:	Phone No:	Relationship:
Name:	Phone No:	Relationship:

RACE REGISTRATION INFORMATION CONTRACT
 (Please place a check mark by the appropriate entries below)

Race				

QUESTIONNAIRE

(Please take a moment and answer the questions below so that we can continuously improve on our quality of service)

How did you hear about us? _____

Do you have any prior professional bicycle racing experience? If yes, how many years? _____

Name of professional races participated before _____

Is there any professional cyclist information in your family? Yes [] No []

Other service(s) you would like to see IC3 execute _____

Additional comment(s) _____

SAMPLE REGISTRATION FORM



PAYMENT INFORMATION	
"OFFICE USE ONLY"	
Payment Type	Check <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card <input type="checkbox"/>
Credit Card Number	
Card Type	Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover <input type="checkbox"/>
Expiration Date	Security Code:

****NOTICE****

I ACKNOWLEDGE THAT BY SIGNING THIS DOCUMENT, I AM ASSUMING THE RISKS ASSOCIATED WITH CYCLING, AGREEING TO INDEMNIFY, NOT TO SUE AND RELEASE FROM LIABILITY INNER CITY CYCLING CONNECTION, INC., IT'S ASSOCIATIONS, CORPORATION BOARD OF DIRECTORS, IT'S RESPECTIVE AGENTS, EMPLOYEES, VOLUNTEERS, MEMBERS, SPONSORS, PROMOTERS, AND AFFILIATES (COLLECTIVELY "RELEASEES"), AND THAT I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS. THIS ENTRY BLANK AND RELEASE IS A CONTRACT WITH LEGAL AND BINDING CONSEQUENCES AND IT APPLIES TO ALL ACTIVITIES PERTAINING TO INNER CITY CYCLING CONNECTION, INC., REGARDLESS WHETHER OR NOT LISTED ABOVE. IN ADDITION, BY SIGNING THIS DOCUMENT I UNDERSTAND AND AGREE TO THE FACT THAT INNER CITY CYCLING CONNECTION, INC. AND ITS AFFILIATES (COLLECTIVELY "RELEASEES") ARE IN NO WAY LIABLE FOR ANY INJURIES SUSTAINED OR LOSS OF PROPERTY DURING PARTICIPATION AT THE MARTIN LUTHER KING JR. BIKE RACE CLASSIC OR AT ANY OF ITS RELATED FUNCTIONS.

IN ADDITION, BY SIGNING THIS CONTRACT/REGISTRATION FORM, I AM AGREEING TO ALL TERMS AND CONDITIONS SET FORTH WITHIN.

- 1) _____ (MEDIA RELEASE) I give permission for photos, video footage, and audio of the person listed in this contract taken at INNER CITY CYCLING CONNECTION, INC. and its related functions to be used for all promotional purposes (website, myspace, facebook, magazine, flyers, posters, television, radio, etc.)
- 2) _____ (REGISTRATION PAYMENT) The registration fee of \$35 is due with this application. A \$25 assessment fee will be applied to all returned checks.
- 3) _____ (CANCELLATION POLICY) I agree to provide INNER CITY CYCLING CONNECTION, INC. written notice 15 days prior to any withdrawal.
- 4) _____ (ORIENTATION BOOKLET) I received, read, and fully understand our orientation booklet and all it contains including our racing policies, dress code, and payment policies.

I HAVE READ ALL THE TERMS AND CONDITIONS SET FORTH IN THIS CONTRACT AND UNDERSTANDS THEM FULLY

Signature of Student _____ AGE _____ DATE _____

Signature of Parent/Guardian _____ DATE _____



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P.O. Box 82311
 Los Angeles, CA 90082

OFFICE USE ONLY	
Review By	_____
Rental Space Number	_____
Payment Status	_____
Other Info	_____

Office: (323)839-5012 Fax: (323)291-2582 Email: donic3e@yahoo.com

www.ic3cycling.com

VENDOR BOOTH REGISTRATION FORM

COMPANY INFORMATION (Please Print Clearly)	
Company Name/Name of Booth (DBA)	_____
Name of Owner	_____
Name and Date of Event	_____

COMPANY CONTACT INFORMATION (Please Print Clearly)			
Mailing Address	_____		
	Address	Street	Suite #
	City		State
Contact Information	() --	() --	() --
	Day Time Phone No.	Night Time Phone No.	Cell Phone No.
	Fax No.: () --		
	Email Address: _____		
Booth Type	Arts & Crafts Booth \$150--- []		Food Booth \$250--- []

Special Notes _____ _____ _____	
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SAMPLE VENDOR BOOTH FORM



****NOTICE****

I ACKNOWLEDGE THAT I, MY EMPLOYEES OR VOLUNTEERS WILL NOT BE COVERED UNDER ANY OF THE SPONSOR LIABILITY INSURANCE FOR ANY INJURY INCURRED OR CAUSE AS A RESULT OF MY PARTICIPATION IN THE ABOVE MENTIONED EVENT/ACTIVITY BUT WOULD BE RESPONSIBLE THROUGH PERSONAL INSURANCE FOR ANY AND ALL MEDICAL EXPENSES INCURRED AS A RESULT OF INJURIES FROM THIS PARTICIPATION.

I UNDERSTAND I AM COMPLETELY RESPONSIBLE FOR ALL LIABILITIES, DAMAGES, AND INJURIES I, MY EMPLOYEES, MY VOLUNTEERS OR MY PARTICIPANTS MAY CAUSE TO INNER CITY CYCLING CONNECTION & ITS ASSOCIATES, ITS MEMBERS, EMPLOYEES, AND ALL THIRD PARTIES (E.G.: SPECTATORS, BUYERS, ETC.) AS PART OF MY PARTICIPATION IN THIS EVENT INCLUDING DAMAGES OR INJURIES CAUSE BY MY EQUIPMENT, FOOD, DISPLAYS, VEHICLES, AND SUPPLIES AND INCLUDING ANY AND ALL INJURIES OF ILLNESS MY PRODUCTS MAY CAUSE.

I HEREBY EXPRESSLY WAIVE AND RELEASE INNER CITY CYCLING CONNECTION (IC3) AND IT ASSOCIATES FROM ANY AND ALL RIGHTS OR CLAIMS OF ANY NATURE WHATSOEVER I MAY HAVE AGAINST INNER CITY CYCLING CONNECTION, ITS ASSOCIATES, ITS MEMBERS, EMPLOYEES ARISING OUT OF, IN CONNECTION WITH, OR RESULTING FROM THE ABOVE EVENT/ACTIVITY.

IN ADDITION, BY SIGNING THIS CONTRACT/REGISTRATION FORM, I AM AGREEING TO ALL TERMS AND CONDITIONS SET FORTH WITHIN.

- 1) _____ (MEDIA RELEASE) I give permission for photos, video footage, and voice of the student listed in this contract taken at INNER CITY CYCLING CONNECTION, INC. and it related functions to be used for all promotional purposes (website, myspace, facebook, magazine, flyers, posters, television, radio, etc.)

I HAVE READ ALL THE TERMS AND CONDITIONS SET FORTH IN THIS CONTRACT AND UNDERSTANDS THEM FULLY

Signature of Student _____ AGE _____ DATE _____

Signature of Parent/Guardian _____ DATE _____



Inner City Cycling Connection

Inner City Cycling Connection

**13th Annual
Martin Luther King Jr
CLASSIC BIKE
CRITERION RACE,
BIKE FESTIVAL, AND
HEALTH FAIR EXPO**

JANUARY SUNDAY 17, 20XX

West LA College

**9000 Overland Avenue
Culver City, CA 90230**

**Starting At
8am** **For More Info Visit
www.innercitycycling.org**



Sponsors Area

SAMPLE FLYER



CONTACTS

☐ DONALD HARRIS

☐ (323)839-5012

☐ Email: donic3e@yahoo.com

☐ SHANE MCNEIL

☐ (424)414-9700

☐ Email: shanemcneil1972@gmail.com

Website: www.innercitycycling.org

**PLEASE NOTE:

We would appreciate your response at your earliest convenience to begin planning for this fantastic event.

We are looking forward to having a mutually beneficial relationship with West LA College.



Inner City Cycling Connection