

Sampling of Stations:

Kayaking

Fishing

Wildlife ID

Biking

Brain Games

Construction

Plant ID

Target Practice



26313 Burlington Rd

Kansasville, WI 53139

Entrance is located in Kenosha County,
approximately nine miles west of I-94
on Highway 142



For information call

(262) 878-5607 or (262) 878-5609

BongNaturalistAssociation.org

**Sunday, June 24
2018**



**Race through the park, against time and
other teams, to complete fun outdoor
challenges and take home the prize!**

Supporting

Bong State Recreation Area

Adventure Awaits...

Get Outdoors!

Join the Race!

Sunday, June 24

12:30-1pm Check in at the
Visitor Center

1-5pm Race is on!

5-6pm Dinner and Awards



- ◆ \$70 team fee—teams of two
- ◆ Must be 21 or older
- ◆ Bring one bike and a vehicle
- ◆ Moderately challenging physical activities and outdoor skills
- ◆ Event is outside and will go rain or shine—dress accordingly
- ◆ No dogs allowed

Registration Deadline: June 10

Each participant receives a t-shirt, swag bag, afternoon of fun & dinner with beverage sampling.

Winning team takes home a fabulous handmade trophy.



All proceeds benefit the park



Send completed entry form and a check payable to: **WI DNR**
ATTN: ANR—Bong State Recreation Area—26313 Burlington Road—Kansasville, WI. 53139

Name: _____ Phone: (____) _____ I certify I am 21+ _____

Address: _____ E-mail: _____

City: _____ State: _____ Zip: _____

T-shirt Size (Circle): **S** **M** **L** **XL** **2X (Add \$2)** **3X (Add \$2)**

Waiver: In consideration of the acceptance of my entry, I, the undersigned, intending to be legally bound for myself, my Heirs, Executors and Administrators, do hereby release any and all sponsors of this event, and their representatives, successor and assigns from any and all liability arising from illness or injuries I may suffer as a result of my participation in this event. I also understand and agree that any sponsor may subsequently use for publicity and/ or photographs, videotapes and recordings for me participating in this event without obligation or liability to me.

Signature: _____ Date _____

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Signature: _____ Date _____