

FACTS ABOUT EPILEPSY

- Epilepsy affects almost 3 million Americans of all ages.
- Approximately 81,000 patients in Louisiana have epilepsy.
- Epilepsy is the most common neurological disorder in children, & the 3rd most common neurological disorder in adults after Alzheimer's disease and strokes.
- Approximately 200,000 new cases are diagnosed each year.
- In 70% of epilepsy cases, the cause is unknown.
- More people over the age of 65 develop epilepsy than any other age group.
- 1 in 10 Americans will experience a seizure.
- Epilepsy is treated with medications, surgery, vagus nerve stimulation, or a special diet.
- Most seizures last from seconds to minutes, depending on type.

MISSION

The mission of the Epilepsy Foundation of Louisiana is to enhance the quality of life of individuals living with epilepsy and seizure disorders by increasing public awareness and addressing individual needs. We are a 501(c)(3) nonprofit agency, and an affiliate of the national Foundation.

SPONSORS

We would like to thank the businesses and individuals who have helped in making this event possible. (Sponsorship is available by logging into www.seizetheroad.org or calling (800) 960-0587)



"SEIZE THE ROAD"

BLOW OUT THE FLAME OF EPILEPSY

Epilepsy Foundation of Louisiana
Bike Tour and Walk for North Louisiana

DATE: Saturday September 24, 2011
TIME: 7:00-7:45 AM—raceday registration
8:00 AM—Bike Tour rollout
8:30 AM—Healthwalk
START LOCATION: Stoner Skate Board Park off of the Clyde Fant Parkway
BIKE COURSE: GREAT COURSES—to Cross Lake and Caddo Lake!!! Come out and ride!!!
5K: Race will start and end at the Stoner Skate Board Park and will be run on the parkway.

ENTRY FEES: \$25.00—pre-registration by Sept. 19th w/T-shirt
\$35.00—registration after Sept. 19th and race day w/T-shirt
\$25.00—raceday w/out T-shirt
\$25.00—"Flame-worthy"
(unable to participate, w/T-shirt)
Children under 12 participate free with each paid adult participant

REGISTRATION BY MAIL: Epilepsy Foundation of Louisiana
Attn: "Seize the Road"
PO Box 52205
Shreveport, LA 71135
***must be postmarked by Sept. 19th for \$25.00 pre-registration**

REGISTRATION BY PHONE: (800) 960-0587 or (318) 402-6752

ONLINE REGISTRATION: www.seizetheroad.org or www.sportspectrumusa.com

T-SHIRTS: Will be given out on the day of the race to all pre-registrants, prior to the start of the event (available at registration table)
May also be picked up in advance @ Sportspectrum—Friday, Sept. 23th from 10-6

REFRESHMENTS: Fully stocked rest stops and lunch will be provided

ROUTES: Visit www.seizetheroad.org or www.sportspectrumusa.com

EVENT REGISTRATION FORM

Make Checks payable to: Epilepsy Foundation of Louisiana
PO Box 52205
Shreveport, LA 71135
Call (800) 960-0587 or (318) 402-6752
Register Online: www.seizetheroad.org

PLEASE PRINT:

LAST NAME _____

FIRST NAME _____

EMAIL _____

ADDRESS _____

CITY, STATE, ZIP _____

TELEPHONE# _____

BIRTHDATE _____ AGE _____

SHIRT SIZE: YL S M L XL XXL XXXL

HEALTHWALK (4 MILES)

17 MILES

41 MILES

60 MILES

FLAMEWORTHY (Sleep In—T-shirt Only)

_____ Individual living with epilepsy

CREDIT CARD PAYMENT—Must be through
ONLINE REGISTRATION!
CASH or CHECK only with event application.

I know that riding in a bike tour is a potentially hazardous activity. I should not enter and ride unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the bike tour. I assume all of the risks associated with riding in this event but not limited to fall, contact with other participants, the effects of weather, including high heat and/or humidity, traffic, and other conditions of the road, with all such risks being known and appreciated by me. Having read this waiver and knowing those facts and in consideration of your accepting my entry, I for myself and any one else entitled to act on my behalf, waive and release the epilepsy Foundation of Louisiana, Sportspectrum, Sportspectrum Race Management, and all sponsors their representatives and successors from all claims of any kind arising out of my participation in the event. I grant permission for the foregoing to use any photographs, motion picture recordings or any other record of this event for any legitimate purpose.

Signature: _____ Date: _____

(Signature of parent/guardian if entrant is under 18 years of age) _____ Date _____