



BC Randonneurs Cycling Club

Permanent Brevet #141

Control Card

Silver Triangle 215K

Name: _____

Address: _____

City: _____ **Province/State:** _____

Country: _____ **Postal/Zip Code:** _____

Telephone: _____ **Email:** _____

Founding member of Les Randonneurs Mondiaux (1983)

Each Randonneur has the control card signed at each control between the opening and closing times. After completion send the control card to the permanents results coordinator. Scans preferred.

Date: _____ **Start Time:** _____

Finish Time: _____

Elapsed Time: _____

Rider Signature at Completion: _____

Permanent Brevet Program Coordinator Authorization

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Distance (km)	Opening Time (from start)*	Closing Time (from start)*	Location	Establishment	Signature	Time
0.0			Nelson	Hume Hotel		
69.0	2:02	4:36	Kaslo	Your Choice		
116.0	3:25	7:44	New Denver	Valhalla Inn or Your Choice		
167.0	4:55	11:08	Winlaw	Your Choice		
215.7	6:23	14:24	Nelson	Hume Hotel		

Emergency contact: _____.
(name) (phone number)

Note that the times are formatted hours:minutes from the start of the permanent brevet.



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