



Breathless Agony Century Refund Form

MAIL TO:

Breathless Agony Refund
Kahler Cycling Academy
117 N. Prospect Ave.
Tustin, CA 92780

Please print out, fill in, and mail this form. Please do not fax or e-mail this form.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell Phone: _____

E-Mail: _____

- Refund** my 2016 Breathless Agony Entry
- Please send me a refund check for \$45— the remainder covers the refund processing fee
 - Refund request must be **mailed** with a postmark on or **before April 1, 2016**

Entrees are non-transferrable.

Signature: _____

Date: _____