



BC Randonneurs Cycling Club

Permanent Brevet # 186

Control Card

Journey of the Sorcerer 203 km

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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Permanent Brevet Number: 186



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Distance (km)	Opening Time (from start)*	Closing Time (from start)*	Location	Establishment or Info Clue	Initials or Answer	Time
0.0	0:00	1:00	Lougheed Hwy & Kennedy	Eso or choice		
101.8	3:00	6:48	Wood Lake Recreation Area	Find question; provide answer		
203	5:53	13:30	Lougheed Hwy & Kennedy	Eso or choice		

Emergency contact: _____
(name) (phone number)

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



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