



---

## REGISTRATION FIELDS OVERVIEW

v1.0

---

# Table of Contents

---

<b>2019 RIDER REGISTRATION</b>	<b>3</b>
Step 1a: Personal Details	3
Step 1b: Affiliation Details	5
<i>DaVita Teammates</i>	5
<i>Non-DaVita Teammates</i>	7
Step 1c: Ride Details	9
Step 1d: Emergency Contact & Waivers	14
Step 2: Payment Details	16

---

## 2019 RIDER REGISTRATION

### STEP 1A: PERSONAL DETAILS

Registration Progress ▶ **1a** Personal Details **2** Payment Details **3** Registration Complete

#### Step 1a: Personal Details

Title *	<input type="text" value="Mr."/>				
First Name *	<input type="text"/>	Middle Initial	<input type="text"/>	Last Name *	<input type="text"/>
Email address *	<input type="text"/>	Verify Email address *	<input type="text"/>		
Password *	<input type="password"/>	Verify Password *	<input type="password"/>		
Gender *	<input checked="" type="radio"/> Male <input type="radio"/> Female	Birth Date *	<input type="text" value="Jan"/>	<input type="text" value="01"/>	<input type="text" value="1925"/>
Address Line 1 *	<input type="text"/>		Address Line 2	<input type="text"/>	
City *	<input type="text"/>		State/Province *	<input type="text" value="Choose a State/Province"/>	
Country *	<input type="text"/>		Zip Code *	<input type="text"/>	
Phone Number *	<input type="text"/>	<input type="text"/>	<input type="text"/>		

The following personal details are required for all registrants:

- 1) Title
- 2) First Name
- 3) Middle Initial
- 4) Last Name

- 5) Email address
- 6) Password
  - a. Does not display when user is logged in.
- 7) Gender
- 8) Birth Date
- 9) Address Line ½
- 10) City
- 11) State/Province
- 12) Country
- 13) Zip Code
- 14) Phone Number

## STEP 1B: AFFILIATION DETAILS

### DAVITA TEAMMATES

Registration Progress ▶ **1b** Affiliation Details **2** Payment Details **3** Registration Complete

#### Step 1b: Affiliation Details

I am a DaVita Teammate \*  Yes  No

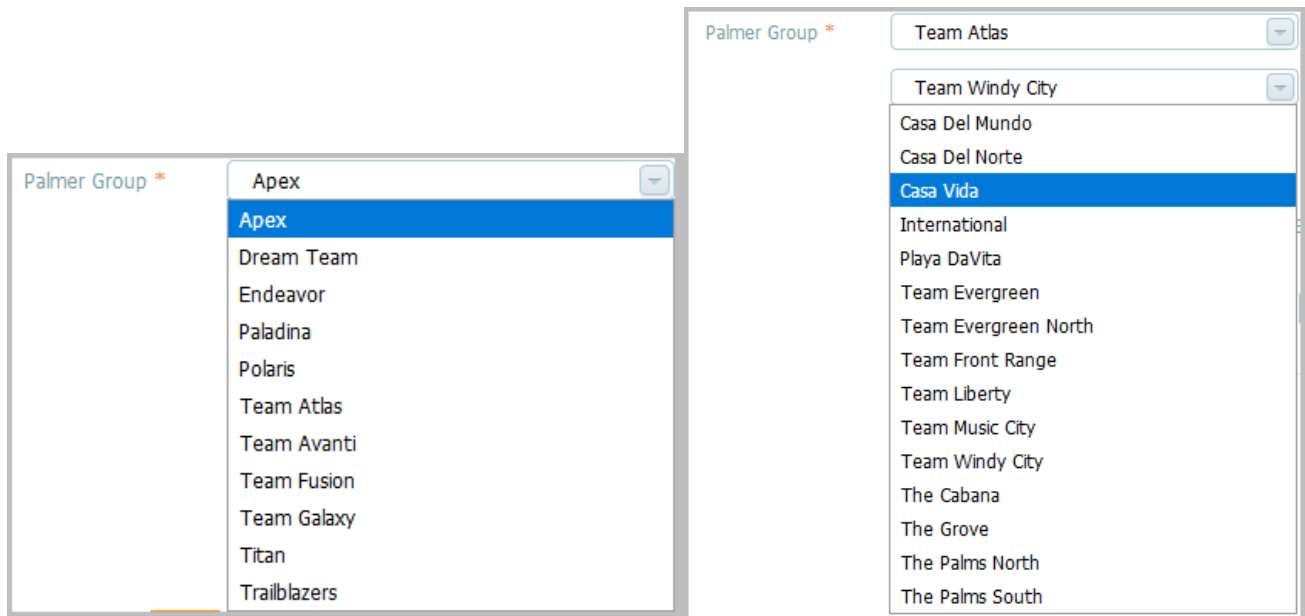
How are you affiliated with DaVita? \*  DaVita Kidney Care  
 DaVita Labs  
 DaVita Physician Solutions  
 DaVita Health Solutions  
 Lifeline Vascular Care  
 Nephrology Practice Solutions by DaVita  
 Other

Teammate ID \*  Manager's Name \*  Manager's Email \*

Job Title \*  Department/Clinic \*

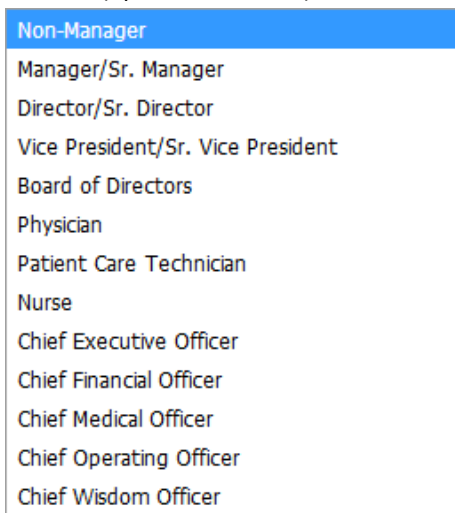
**CANCEL** **NEXT**

1) If affiliated with “DaVita Kidney Care”, registrants must provide their Palmer Group.



2) The following fields are required for all DaVita teammates:

- a. Teammate ID
- b. Manager’s Name
- c. Manager’s Email
- d. Job Title (options as follows)



- e. Department/Clinic

Registration Progress > **1b** Affiliation Details **2** Payment Details **3** Registration Complete

### Step 1b: Affiliation Details

I am a DaVita Teammate \*  Yes  No

How are you affiliated with DaVita? \*  I am a Dialysis Patient  
 I am a family member of a Dialysis Patient  
 Spouse/partner, sibling, parent or child (21 or over) of a DaVita teammate  
 Friend of DaVita  
 Nephrologist who is a credentialed physician in DaVita facilities  
 Village Service Partner (VSP)

**CANCEL** **NEXT**

1) For those registering as “I am a family member of a Dialysis Patient” OR “Spouse/partner, sibling, parent or child (21 or over) of a DaVita teammate”.

a. The registrant must select their related Tour registrant.

Select your related DaVita teammate \* --Choose One-- ?

b. Please note the following:

**Your DaVita affiliated spouse, partner or family member must already be registered for the Tour in order for you to complete your registration. If their name does not appear in this drop down, please contact them to verify their registration.**

c. Prior to registration opening, we make sure to convey to all registrants that their related teammate must be registered first. This is required in order to determine the registration fee and fundraising minimum for the registrant.

2) For those registering as “Friend of DaVita”

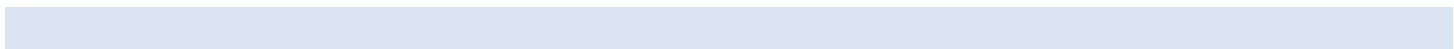
- a. “Friend of DaVita Registration Code” must be provided. Please contact the Tour team to determine if you are eligible to receive this code.

Friend of DaVita Registration Code *	<input type="text"/>
--------------------------------------	----------------------

3) For those registering as “Village Service Partner (VSP)”

- a. The following sub-questions are required. Please contact the Tour Sponsorship team to receive the VSP code.

VSP Registration Code *	<input type="text"/>
VSP Company Type *	<input checked="" type="radio"/> Healthcare Vendor <input type="radio"/> Non-Healthcare vendor
VSP Company Name *	<input type="text"/>





## STEP 1C: RIDE DETAILS

Step 1c gathers all of the ride specific details from equipment to travel plans. Please see the detailed summary of each question below.

Registration Progress ▶ **1c** Ride Details \* **2** Payment Details **3** Registration Complete

### Step 1c: Ride Details

Return Rider \*  Yes  No

Height \*  Feet  Inches

Using a Backroads bike or your own bike? \*  Backroads  Own

Handlebar Type \*  Pedal Type \*

Are you bringing your own helmet? \*  Yes  No ▶ If you are bringing any of your own equipment, this means you DO NOT require that equipment from Backroads.

Are you bringing your own saddle/seat? \*  Yes  No

Bringing your own sleeping bag? \*  Yes  No

Bringing your own sleeping pad? \*  Yes  No

Bringing your own tent? \*  Yes  No

Driving to the trip start? \*  Yes  No

---

Jersey Size \*  Tour T-Shirt Size \*   
▶ Please note: Jerseys tend to run small. The Tour recommends going one size larger than your usual T-shirt size.

Backroads T-Shirt

Tentmate \*  Dietary Restrictions \*

---

Additional Information  
Let us know if you have any specific needs (Please note: a doctor's note is required for any medical equipment or electricity request.)

---

1) Return Rider?

a. Yes

Return Rider \*  Yes  No

Number of years ridden? \*

i. Number of years ridden values: 1-14

b. No

Return Rider \*  Yes  No

2) Height

a. Feet/Inches

Height \*  Feet  Inches

i. Feet values: 3-7

ii. Inches values: 00-11

3) Using a Backroads bike or your own bike?

a. Backroads

Using a Backroads bike or your own bike? \*  Backroads  Own

Handlebar Type \*  Pedal Type \*

i. Handlebar Type

1. Upright (Flat)
2. Drop (Curved)

ii. Pedal Type

1. Flat
2. Toe Cages with Straps
3. Bring Own

b. Own

Using a Backroads bike or your own bike? \*  Backroads  Own

How will you transport your bike? \*

i. How will you transport your bike?

1. Ship to local bike shop
2. Bring on plane/car IN a bike box
3. Bring on plane/car WITHOUT a bike box

4) Are you bringing your own helmet?

Are you bringing your own helmet? \*  Yes  No ▶ If you are bringing any of your own equipment, this means you DO NOT require that equipment from Backroads.

5) Are you bringing your own saddle/seat?

Are you bringing your own saddle/seat? \*  Yes  No

6) Bringing your own sleeping bag?

Bringing your own sleeping bag? \*  Yes  No

7) Bringing your own sleeping pad?

Bringing your own sleeping pad? \*  Yes  No

8) Bringing your own tent?

Bringing your own tent? \*  Yes  No

9) Driving to trip start?

a. Yes

Driving to the trip start? \*  Yes  No

How will you arrive? \*  I will arrive at the airport and be taking a shuttle  
 I will be **dropped off** at the first camp site

*Reminder: Riders are not allowed to drive to the starting campsite and park a vehicle. You must either **ride the shuttle** from the airport or be **dropped off** at the first location.*

i. I will arrive at the airport and be taking a shuttle

ii. I will be dropped off at the first camp site:

1. *Reminder: Riders are not allowed to drive to the starting campsite and park a vehicle. You must either ride the shuttle from the airport or be dropped off at the first location.*

b. No

Driving to the trip start? \*  Yes  No

#### 10) Jersey/Shirt Size

Jersey Size \*  Tour T-Shirt Size \*   
▶ Please note: Jerseys tend to run small. The Tour recommends going one size larger than your usual T-shirt size.  
Backroads T-Shirt Size:

a. Jersey Size options: Small – 6XL

- i. *Please note: Jerseys tend to run small. The Tour recommends going one size larger than your usual T-shirt size.*

b. Tour T-shirt Size options: Small – 5XL

c. Backroads T-Shirt Size options: Small – 2XL

#### 11) Tentmate

Tentmate \*

*Please note: If you do not provide a tentmate, one will be provided for you.*

#### 12) Dietary Restrictions

Dietary Restrictions \*

#### 13) Additional Information

**Additional Information**  
Let us know if you have any specific needs (Please note: a doctor's note is required for any medical equipment or electricity request.)

- a. *Let us know if you have any specific needs (Please note: a doctor's note is required for any medical equipment or electricity request.)*

## STEP 1D: EMERGENCY CONTACT & WAIVERS

Registration Progress > **1d** Emergency Contact & Waivers 2 Payment Details 3 Registration Complete

### Step 1d: Emergency Contact & Waivers

Emergency Contact Information

Name \*   Phone \*

Relationship with Emergency Contact \*

---

I acknowledge and agree to the Tour DaVita 2018 [Waiver and Release](#). \*

I understand that my signup fee is non-refundable, with absolutely no exceptions. \*

I understand that, as a DaVita teammate, I must use PTO to participate in this event. \*

I attest that I will follow the [Tour DaVita Compliance Handbook](#) guidelines when soliciting donations to meet my fundraising goal. \*

---

**Emergency Contact** fields are consistent across all registration types:

Emergency Contact Information

Name \*   Phone \*

Relationship with Emergency Contact \*

- 1) Name
- 2) Phone
- 3) Relationship with Emergency Contact

**Waivers** on Step 1D vary based on the registration type.

**Example 1: Patient Registration**

- I acknowledge and agree to the Tour DaVita 2018 **Waiver and Release**. \*
- I attest that I will follow the [Tour DaVita Compliance Handbook](#) guidelines when soliciting donations to meet my fundraising goal. \*
- I understand that, as a patient, my registration will be held until certain criteria is met by my physician and others. \*

**Example 2: DaVita Teammate Registration**

- I acknowledge and agree to the Tour DaVita 2018 **Waiver and Release**. \*
- I understand that my signup fee is non-refundable, with absolutely no exceptions. \*
- I understand that, as a DaVita teammate, I must use PTO to participate in this event. \*
- I attest that I will follow the [Tour DaVita Compliance Handbook](#) guidelines when soliciting donations to meet my fundraising goal. \*

## STEP 2: PAYMENT DETAILS

The Payment Details page is the finally step in the process and is only shown to those requiring a registration fee.

Registration Progress ▶ 1c Ride Details **2 Payment Details** 3 Registration Complete

### Step 2: Payment Details

Registration Amount: \$ 200

Payment Type \*  Credit Card

#### Billing Information

Billing Name & Address details same as personal details

First Name \*  Last Name \*

Email Address \*

#### Card Type \*

DISCOVER  VISA  American Express

#### Card Details

Card Number \*  Expiration Date \*  /  ▶ ex. 08/14

#### Billing Address

Address \*  City

State \*  Zip Code \*

Country \*  Phone Number \*