REMC RIDE FOR CHARITY
2010 PRE-REGISTRATION

REGISTRATION FEES

BIKER - $25.00
RIDER - $15.00

BIKER NAME_____ RIDER_____

MAILING ADDRESS_____

CITY/STATE/ZIP_____

PHONE NUMBER _____DAYTIME _____EVENING

CELL PHONE_____E-MAIL ADDRESS_____

MEMBER OF (CLUBS, ORGANIZATION, DISTRICT, CHAPTER)

_____

No. MILES RIDDEN TO START_____; MAKE, MODEL AND YEAR OF BIKE_____

$10.00 2010 RIDE FOR CHARITY T-SHIRTS $10.00

Pre-purchase your red t-shirt and pick up in the office

Please list the number of each shirt ordering:

Red Youth: ___S ___M___L; Red Adult: ___S ___M ___L ___XL ___XXL

Total Number of Shirts Ordered:_____

Total Paid for Shirts:_____

RELEASE STATEMENT

The undersigned hereby release(s) and agree(s) to hold harmless Clark County REMC, the promoters, owners and lessees of the premises, the participants, the officers, the directors, representatives, agents, volunteers, and employees of all, from any and all liability, loss, claims, and demands, that may arise from any loss, damage, or injury (including death to my (our) person(s) or property) in any way resulting from, or arising in connection with this event, and whether arising while engaged in competition or practice or preparation therefore, or while upon entering or departing from said premises, from any cause whatsoever. The undersigned know(s) and accept(s) the risk and danger to myself (ourselves) and my (our) property while upon said premises or while participating or assisting in this event, voluntarily and in reliance upon my (our) own judgment and ability, and hereby assume(s) all risks for loss, damage, injury (including death to myself (ourselves) or my (our) property) from any cause whatsoever.

BIKER SIGNATURE_____

RIDER SIGNATURE_____

DATE_____ AMOUNT PAID_____

DECISION OF JUDGES FINAL

Make checks payable to: Clark County REMC
Mail to:

Clark County REMC
P O Box L
Sellersburg, IN 47172

812/246-3316 or 800/462-6988