

BCA RIDE FOR YOUTH MENTAL HEALTH

REGISTRATION/DONATION FORM

AME:ADDRESS:					
CITY:P.C:	TEL#:		_Email:		
PASSENGER NAME:					
EMERGENCY CONTACT:			TEL#:		
F THE PARTICIPANT IS UNDER 18 YEARS OF	AGE, PLEASE COMPLETE TH	E FOLLOWING:			
NAME OF GUARDIAN AUTHORIZED TO SIGN	FOR PARTICIPANT:				
ADDRESS:			TEL#:		
SIGNATURE:	·				
SIGNATURE: YES I have a valid motorcycle driver's lic	ense, approved helmet & ins	surance required to par	rticipate		
hereby release and discharge the Barrie Convith respect to the use of any of the above receive any financial remuneration for any Construction Association.	or my participation in any re	elated Barrie Construc	tion Association acitivities. I ackn	owledge that I will not	
Signed:		Date:			
Pledges are to be collected in advance and preser	nted at the event. Tax receipts (i	f requested) will be maile	ed out for pledges over \$20.00 provide	d complete mailing	
nformation is shown below.					
Name		Address	Postal Code	Amount	
				_	
			Total Diodess		
Pagistration: \$50.00 L with passan	ger \$70.00		Total Pledges Registration		
Registration: \$50.00 with passenger \$70.00 Please make copies of this sheet for additional donations			Total		
riease make copies of this sheet for additional donations			IUlai		