BCA RIDE FOR YOUTH MENTAL HEALTH

REGISTRATION/DONATION FORM

NAME:_____ADDRESS:_____

CITY:_____P.C:_____TEL #:_____Email:_____

PASSENGER NAME:_____

EMERGENCY CONTACT:_____TEL #:_____

IF THE PARTICIPANT IS UNDER 18 YEARS OF AGE, PLEASE COMPLETE THE FOLLOWING:

NAME OF GUARDIAN AUTHORIZED TO SIGN FOR PARTICIPANT:_____

ADDRESS:_____TEL#:_____

SIGNATURE:_____

___ YES I have a valid motorcycle driver's license, approved helmet & insurance required to participate

WAIVER

I hereby release and discharge the Barrie Construction Association and its agents, employees and licensees from any claim or action that I may have with respect to the use of any of the above or my participation in any related Barrie Construction Association acitivities. I acknowledge that I will not receive any financial remuneration for any of the above and that my compensation is the opportunity to contribute to the activities of the Barrie Construction Association.

Signed:_____ Date:_____

Pledges are to be collected in advance and presented at the event. Tax receipts (if requested) will be mailed out for pledges over $20.00 provided complete mailing information is shown below.

Name	Address	Postal Code	Amount
		Total Pledges	
Registration: $60.00 | with passenger $80.00		Registration	
Please make copies of this sheet for additional donations		Total	