BMA Spring Trail Ride

Dual Sport Ride

Proudly Supporting
"Ride for Dad"
Fighting Prostate Cancer

Proceeds to Benefit the Ride For Dad's Fight Against Prostate Cancer

RIDER PLEDGE/DONATION FORM

RIDER NAME: _____ ADDRESS: _____

City: _____ POSTAL CODE: _____

PHONE: _____ Email: _____

Signature: _____ Date: _____

All donations must be collected and submitted before the Ride begins. Riders please bring a personal cheque for the total cash amount collected. Receipts will be issued for donations of $20 or more, provided name and address are complete and legible. Please make all cheques payable to: "Ride for Dad".

Name	***Address***	***Postal Code***	***Amount***	√
		TOTAL		

Please make copies of this sheet for additional donations Page ___ of ___

Charitable Registration #851333179RR0001 ***Thank you for your donation!***

Name	***Address***	***Postal Code***	***Amount***	Cheque √