



**Annual Trail Ride - October 19, 2019 11AM-4PM (rain date: October 26, 2019)
Pre Registration Form**

Name: _____

Address: _____ Age: _____

City: _____ State: _____ Zip: _____

Phone #: _____

AMA # (optional): _____ Bike: _____

Email: _____

Registration is \$30 per rider and is PRE REGISTRATION ONLY. 200 rider limit. Registration fees are transferable but nonrefundable. AMA Release and Waiver forms must be completed and signed by the rider or the guardian of the rider before participating in the trail ride. AMA Release and Waiver forms will be provided at check in on the morning of the trail ride.

Make all checks payable to White Rose Motorcycle Club with 2019 Trail Ride in the memo.

Mail your check and completed form to: White Rose Motorcycle Club
Attn: Trail Ride
5252 Hillclimb Rd
Spring Grove, PA 17362

I acknowledge that I have read and agree to the terms and conditions above.

Signature: _____ Date: _____

