

BO BIKES BAMA

2019 Day-of Registration Form

Full Name

Mailing Address

City

State

Zip

Phone Number

Email Address

If you are under the age of 18, your parent or guardian has read, understands and agrees to the waiver and release

Yes

No

Name of Parent or Guardian if applicable

Emergency Contact Name

Emergency Contact Phone

Length of Ride:

60 Miles

20 Miles

Office Use Only

Payment Type: Check | Cash | Credit Card

Rider #:

Waiver Signed: Yes | No