

Motor Cycle Tour Registration Form 2009



Your Name

Address

City

State

Zip

Home Phone

Work Phone

Riders

<input type="checkbox"/>	1 rider @ \$35 (\$40 after July 1st 2009)	
<input type="checkbox"/>	1 passenger @ \$35 (\$40 after July 1st 2009)	
Total Enclosed		

Please mark the years you have participated in the Ride for Hope:

- | | | | |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> 1992 | <input type="checkbox"/> 1993 | <input type="checkbox"/> 1994 | <input type="checkbox"/> 1995 |
| <input type="checkbox"/> 1996 | <input type="checkbox"/> 1997 | <input type="checkbox"/> 1998 | <input type="checkbox"/> 1999 |
| <input type="checkbox"/> 2000 | <input type="checkbox"/> 2001 | <input type="checkbox"/> 2002 | <input type="checkbox"/> 2003 |
| <input type="checkbox"/> 2004 | <input type="checkbox"/> 2005 | <input type="checkbox"/> 2006 | <input type="checkbox"/> 2007 |
| <input type="checkbox"/> 2008 | | | |

Please circle your starting point:

Billings | Great Falls | Havre | Kalispell | Missoula | Three Forks

Signature

My signature above signifies I am over the age of 18. Furthermore, It releases myself, my heirs, executors and administrators of any and all rights and claims arising from my participation in this event against the Montana Hope Project and its officers. I agree to abide by the rules and regulations of the event as well as the traffic regulations and laws of the State of Montana.



Make checks payable to: **Montana Hope Project**

Mail this form to:

Montana Hope Project/Ride for Hope
 PO Box 5927
 Helena, Montana 59604