



Ride With a Buddy

July 21, 2018 – Rotary Park, Jefferson
www.tomorrowshope.org

Survivor/Passenger Registration Form

NOTE: A separate registration form is needed for EACH survivor/passenger. Fill out the registration form to participate.

SURVIVOR/PASSENGER INFORMATION:

First Name: _____ Last Name: _____

Address: _____

City, State, Zip: _____

Email: _____ Phone: _____

ADDITIONAL INFORMATION:

Do you have someone you will ride with? ☐ Yes ☐ No

My driver's name: _____
(They MUST fill out a Driver Registration Form)

Please match me with a driver: ☐ Yes ☐ No

I prefer to ride in/on a: Motorcycle** Sidecar Trike Collectable Car

If you wish to ride on a motorcycle, please enter the following questions so we can find the driver that best fits your needs:

Do you have physical limitations? ☐ Yes ☐ No

If yes, what are your limitations? _____

Do you require a backrest? ☐ Yes ☐ No

Will you bring a helmet? ☐ Yes ☐ No

Do you want a helmet? ☐ Yes ☐ No

I have read the Liability Waiver ☐ Yes

Signature: _____ Date: _____

PLEASE REMEMBER:

1. Survivors and passengers ride **FREE!**
2. Return your signed Registration Form. Must sign above indicating you have read the waiver.
3. Call 920-674-8967 with questions!

Tomorrow's Hope Ride With a Buddy - 147 W Rockwell Street - Jefferson, WI 53549