2012 BIKE MS JR REGISTRATION FORM

September 15, 2012
www.bikeMSgeorgia.org

RIDER INFORMATION

Name _____
Address _____
City/St/Zip _____
Phone (H)_____ (W)_____ (C)_____
E-mail _____

Birth Date (Must Be 5-11 years old by event) _____ Gender ❑ Male ❑ Female

Emergency Contact Name: _____ **Phone:** _____

ON A TEAM? TEAM NAME: _____ TEAM CAPTAIN: _____

FUNDRAISING GOAL: _____ (Participant Must List at least $150 minimum pledge)

Please Read the Following Statements Carefully and Indicate Agreement Below:
I understand that by participating in this event, my child is agreeing to pay a minimum of $150 for the Bike MS Jr. Ride 2012 either through pledges or a personal donation.
_____ *Yes, I understand my child's commitment of raising $150 for the Bike MS Jr. Ride 2012.*

I understand that in order to participate in the Bike MS Jr. Ride 2012, my child's minimum commitment of $150 must be turned in prior to or at the packet pickup when obtaining his/her rider credentials (packet pickup dates will be listed on the website as they become available).
_____ *Yes, I understand that my child's minimum fundraising commitment of $150 is due at packet pickup.*

REGISTRATION:

Deadline	Description	Amount
September 9, 2012	Registration Fee	□$25
September 10-14, 2012	Registration Fee ($25) + Minimum Pledge ($150)	□$175
	TOTAL AMOUNT ENCLOSED:	**$**

METHOD OF PAYMENT

☐ **Check**		
☐ **VISA**	**Account #**	**Exp Date:**
☐ **MASTERCARD**	**Account #**	**Exp Date:**
☐ **AMERICAN EXPRESS**	**Account #**	**Exp Date:**
Name as it appears on credit card:		**Security Code:**
SIGNATURE:		

SPECIAL NOTICES: Registration Fees are non-refundable, non-transferable, and do not apply toward minimum pledge. The minimum pledge of $150 is due prior to or at packet Packet-Pickup in order to obtain rider credentials. Waiver forms are available online at www.bikeMSgeorgia.org or by mail and fax from the National MS Society, Georgia Chapter and must be turned in at Packet Pick-Up before a participant can receive their rider number. Blank forms will be available. Bike MS Jr. participants between the eligible participant ages of 5-11 must have their Waiver forms signed by a parent or legal guardian and NOTARIZED. Participants indicating team membership agree to the release of personal contact information to their team's official representative.

Make Checks Payable To: **National Multiple Sclerosis Society**
1117 Perimeter Center West, Suite E101, Atlanta, GA 30338 (678) 672-1000

NMSS Office Use Only:
Pd_____ Amt_____ Dep #_____Ck/Cash_____