

Ride Against Hunger
Saturday July 15, 2017
Registration Form

INFORMATION *Please Print Clearly*		Date:	
Name:			
Passenger's Name (if applicable):			
Address:			
City:		State:	Zip:
Email:		Phone:	
Emergency Contact:		Phone:	
Sponsor Name to Appear on Material:			

ITEMS	PRICE	QUANTITY	AMOUNT
Solo Rider (includes 1 scorecard)	\$15	x \$15	
Rider & Passenger (includes 2 scorecards)	\$25	x \$25	
Scorecard	\$10	x \$10	
Mulligan (limit 2 per scorecard)	\$5	x \$5	
Patch	\$5	x \$5	
Pin	\$3	x \$3	
Raffle Tickets (3 for \$5, 10 for \$10, Arms Length for \$20)			
Hole Sponsor (limit 9)	\$35	x \$35	
Map Sponsor (limit 10)	\$100	x \$100	
Scorecard Sponsor (limit 3)	\$150	x \$150	
Event Sponsor	\$500	x \$500	
Special Contribution			
GRAND TOTAL:			
CHECK #			
RECEIPT #			
Make Check Payable: Cups Cafe Payment Details: cash check credit			
Mail to: Cups Cafe PO Box 83 Medina, Ohio 44258			