

ALL PROCEEDS BENEFIT THE "WOUNDED WARRIOR PROJECT"

(for sorting purposes, please help us by printing your last name here_____)

Name (Rider/Driver): _____ Date of Birth: ____/____/____

Address: _____ Telephone: (____) _____

City, State/Province, Zip Code: _____

Shirt Size: M L XL 2XL

Motorcycle: Make _____ Model _____ Year _____

LIC# _____

Email: (optional) _____

Name (Passenger): _____ Date of Birth ____/____/____

Address: _____ Telephone: (____) _____

City, State/Province, Zip Code _____

Shirt Size: M L XL 2XL

Email: (optional) _____

RELEASE OF LIABILITY: I understand that state law requires vehicles and drivers/riders to be appropriately licensed and endorsed and to have their own liability insurance to operate on state roads and highways and that it is my responsibility to provide that insurance. I, therefore, release and hold harmless the Eric Hall Memorial Foundation event volunteers, sponsors/supporters, participating merchants and event site owners and personnel from any responsibility for any damage or injury I may incur or cause while participating in this event. I have read this form and agree to the above statement (Signature(s) required). **Minors under 18 must have parents sign for them.**

Rider/Driver Signature (Required)

Co-Rider Passenger Signature (Required)

Print & mail completed form with check for \$15 made payable to:

Eric Hall Memorial Foundation
c/o Marge Baker
27060 Villarrica Drive
Punta Gorda, FL 33983

(Registration includes 1 free T-shirt; additional T-shirts are available for \$10)

Your t-shirt(s) will be available at registration the day of event.