



**CHILDHOOD
CANCER CANADA**
FOUNDATION

**PRIZES FOR TOP
15 FUNDRAISERS**

2018 REGISTRATION & PLEDGE FORM

**EVERY \$50 IN
PLEDGES =1 BALLOT
FOR GRAND PRIZE**

***Only record pledges not entered on-line.**

Name: _____
Address: _____
City: _____
Phone: _____

Email: _____
Province: _____
Postal Code: _____
Club Affil.: _____ (for club cup)

**Note: Minimum (\$30) in pledges per bike to ride. Passengers still free.
 Passengers must sign passenger portion below.**

Waiver: I, the undersigned, hereby waive, release and forever discharge the R.O.C.K. Ride, members of the organizing committee, sponsors, supporters, volunteers and all other associates and participants of the event of and from all manner of actions, suits, debts, claims and demands whatsoever for the R.O.C.K. Ride and associated events. I assume full responsibility for injury or damage arising as a result of the participation associated with the R.O.C.K. Ride. This also includes a 'model release' for any photographs & video taken while participating in any of the above mentioned activities.

Signature: _____ **Date:** _____

Passenger Name (if applicable) _____ **(parent signature if under 18)**

Passenger Signature _____ **Date** _____

The event will take place rain or shine. All funds go directly to the Childhood Cancer Canada's Research Fund.

Attention Donors: Receipts for donations of \$20.00 & over will be issued by Childhood Cancer Canada (Charitable No: 13189 7654 RR0001). **Incomplete or illegible addresses WILL NOT be receipted.** Full address required, not just an email address. Cheques can be made payable to: "Childhood Cancer Canada or R.O.C.K. Ride"

NAME	MAILING ADDRESS	CITY	POSTAL CODE	AMOUNT

**All donations must be paid on the morning of the ROCK Ride, Saturday July 7, 2018.
 For more information contact info@rockride.com**

