



Faribault Harley-Davidson

"Rolling into the Future!"

Ride to Benefit the
Muscular Dystrophy Association

Saturday, June 25, 2011

REGISTRATION FORM

Please fill out ALL information and mail the form below along with your registration fee to the MDA office at: MDA—Faribault HD, 7401 Metro Blvd #325SP, Edina, MN 55439

* You do not need to complete this if you have paid online or at the Faribault H-D dealership.

First Name _____ Last Name _____

Mailing Address _____

City _____ State _____ Zip _____

Preferred Phone Number _____

Email _____

(Optional) Passenger or Second Rider

First Name _____ Last Name _____

Mailing Address _____

City _____ State _____ Zip _____

Preferred Phone Number _____

Email _____

\$25 Pre-register (Ride Alone, meal included) - \$10 (Passenger)
\$30 day of (includes meal)

Total \$ _____

Payment Method

Cash Enclosed

Check Enclosed (make payable to MDA)

C.C # _____ Expiration Date ____/____

Type _____ Phone Number _____