



# **PEDAL FOR THE POOR NEW ORLEANS**

## **RIDER FORM**

Please Print.

Name \_\_\_\_\_ T-Shirt Size \_\_\_\_\_

Address \_\_\_\_\_ City and State \_\_\_\_\_

Zip Code \_\_\_\_\_ Phone Number \_\_\_\_\_

Alternate Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Team Name \_\_\_\_\_ Team Leader \_\_\_\_\_

I understand that as a rider, I am responsible for raising \$100 for my ride in Pedal for the Poor New Orleans, so that as a part of my team of 10 (ten) people, we can raise \$1000. I understand that my rider fee will go toward providing lunches to children in Chinandega, Nicaragua. I understand that Amigos for Christ is not responsible for any injury or loss or damage to personal items. I understand that by signing below, I authorize that I am fully responsible for my own safety.

Signed \_\_\_\_\_ Date \_\_\_\_\_

If Rider is a minor (under 18):

Parent or Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_