

Annual "Moving for Independence" First Sunday in May

Basic Info (Please Print)

Name: Phone: E-mail:		Last:	
	Valk or Ride" ***********************************	24K "Leisure Ride"	45K"Crank Hammers Ride"
D			
Participa	ant Fundraisi	ng Options (Childre	n 12 & under are free)
Pay registration	on fee \$20.00	Fee waived	(\$100 raised in pledges)
	res for most dollar amount c	of pledges raised Team of 4 - p	orizes for most dollar amount of pledges raised
Payment	t Options		
Cheque (paya	ıble to IL Vernon)	ash (do not mail) Credit Car	rd
Cheque (paya	ible to it verilon)	asir (do flot filali) Credit Car	Expiry MM/YY
Participa	nt Waiver - м	ust be completed & signed - I	NO EXCEPTIONS
ght or claim to dar uccessors & the spo icycle safety rules a	mages I may have against Ir onsors, for any kind & all inj	ndependent Living Vernon holding t uries I may sustain during the course et at all times. I also agree that any p	rs & administrator, waive & release any & all this event, their agents, representatives, e of the event. I agree that I will abide by photographs taken of me during the entire
Day Mo	nth Year		
Name of Participa	nt (please print) First:		Last:
Signature of Partio	cipant		



Annual **Cycling For Independence**Pledge Form

Collector's Name:					
Phone Number:					
DONATIONS OF \$25.00+ WILL BE	RECEIPTED UPON REQUEST with	full mailing address			
Name					
Address					
Cash Cheque Credit Card _		Expiry MM/YY			
Donation Amount	Donation Receipt YES	NO			
Name					
Address					
Cash Cheque Credit Card		Expiry MM/YY			
Donation Amount	Donation Receipt YES	NO			
Name					
Address					
Cash Cheque Credit Card _		Expiry MM/YY			
Donation Amount	Donation Receipt YES	NO			
Name					
Address					
Cash Cheque Credit Card		Expiry MM/YY			
Donation Amount	Donation Receipt YES	NO			

The mission of Independent Living Vernon is to create sustainable community links, to work for societal change and to remove barriers so that people with disabilities have the opportunity to realize their full potential.

