

**SATURDAY
JUNE 15**

FATHER'S DAY WEEKEND

2024 GREATER MONCTON

MOTORCYCLE RIDE

**FIGHTING
PROSTATE
CANCER**



Registration location: Sobeys on Mountain Road

Registration: 9 to 10:45 a.m.

Kickstands up: 11 a.m.

Fee: \$30 per bike & rider / \$20 per passenger

FREE REGISTRATION with \$100 in pledges

Biker's breakfast included for those who register

50/50 tickets | Show & Shine | Poker Run

220-km ride

Ride patches available for \$5

**Finish back at Sobeys Mountain Road
for BBQ, ticket draw, poker hand**

Pre-register online at RideForDad.ca



Name _____ Chapter name _____

Email _____ Phone _____

Address _____ City/Prov _____ Postal code _____

Emergency contact name (not present on the Ride) _____ Phone _____

Gender Male Female Non-binary Birth year _____ Captain's Club # (if applicable) _____

Vehicle manufacturer _____ I'm riding with team/club/Legion branch (if applicable) _____

I registered online **I'd like to make a personal pledge towards my fundraising goal \$** _____



WAIVER

I hereby warrant that I have a valid operator's licence, approved safety attire, and required insurance to participate in today's event. I understand and am aware that there are dangers and risks involved in taking part and riding in a group such as in the events the Ride For Dad organizes. These dangers and risks include damage, injury, serious injury and/or death. Knowing and appreciating fully these dangers and risks, I the undersigned, hereby waive, release and forever discharge the Ride For Dad, the proceed recipient, the police, members of the organizing committee, sponsors, supporters, volunteers and all other associates with the event of and from all manner of actions, causes of action, suits, debts, claims and demands whatsoever arising from or in connection with the Ride For Dad and associated events. I assume full responsibility for injury or damage arising as a result of my participation in the Ride For Dad event **and for my passengers**. This waiver also includes a "model release" for photographs taken and audio/video recordings made while participating in the above activities.

Signed _____ Date _____

PLEDGES			Amount
Donor name			
Email	Phone		
Address	City/Prov	Postal code	
Donor name			
Email	Phone		
Address	City/Prov	Postal code	
Donor name			
Email	Phone		
Address	City/Prov	Postal code	
Donor name			
Email	Phone		
Address	City/Prov	Postal code	
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Address	City/Prov	Postal code	
Donor name			
Email	Phone		
Address	City/Prov	Postal code	
Donor name			
Email	Phone		
Address	City/Prov	Postal code	
<p>All pledges must be collected and submitted before the Ride begins. Receipts will be automatically issued for donations of \$20 or more, provided name and address are complete and legible. Make all cheques payable to "Ride For Dad." Working in partnership with the Prostate Cancer Fight Foundation, charitable registration #851333179RR0001. Donors, thank you for providing your email address! This will help reduce our costs by allowing us to provide you with an e-receipt.</p>			<p>Total pledges above</p> <p>Personal pledge</p> <p>Registration fee</p> <p>Total overall</p>