



**Read other side carefully, then sign.**

Print Name	Signature	Phone Number	Emergency Contact and Phone	Registered Y/N
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

***Non-Registered Rider Sign-up for Information List (Please print clearly)***

<i>Name</i>	<i>Email</i>
1) _____	_____
2) _____	_____
3) _____	_____
4) _____	_____

**Post-Ride Report**

Ride canceled due to: \_\_\_\_\_

Incidents: If there was an incident or accident on the ride, describe incident below and return form to Dan Guinn, Legal Director for AIDS Network.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_