

National Multiple Sclerosis Society

RIDER PACKET Acknowledgment Form

PLEASE complete the form. PRINT clearly. ONLY one Rider Packet per form.

RIDER'S Name:	
RIDER'S Team Name:	
RIDER'S Date of Birth:	month day year
Name of Person Picking-Up Rider Packet, if different than above:	
OFFICE USE ONLY	□BP MS 150 □Cactus & Crude □Ride the Rim □Ride to the River □Round-Up Ride □Dat's How We Roll □Pedal los Pueblos □The Road Divided □Rock'n Hot Ride Convio ID: Rider #: