

Bike+Braai

Sunday June 2, 2019

Event Registration

Title: Dr. Mr. Mrs. Ms. Other: _____

Cyclist First & Last Name _____

BBQ Attendees First & Last Name(s) (if different than above) _____

Mailing Address _____

City _____ Prov _____ PC _____

Phone _____ Email _____

| CYCLE AND BBQ REGISTRATION | Cost | # Registered | Sub-Total |
|--|----------|--------------|-----------|
| New this year we have fundraising incentives for participants! Set yourself a fundraising goal to be eligible for complimentary registrations, jerseys, gift cards and more. Please select your goal below: <input type="checkbox"/> \$250+ includes complimentary registration with BBQ <input type="checkbox"/> \$500+ includes complimentary registration with BBQ and Jersey <input type="checkbox"/> \$1,000+ includes complimentary registration with BBQ, Jersey and gift card | \$0.00 | | |
| Cyclist – Adults Includes participation in the ride, road side support and gourmet BBQ lunch | \$100 ea | | \$ |
| BBQ only - Adults Includes gourmet BBQ Lunch | \$50 ea | | \$ |
| BBQ only - Kids Includes gourmet BBQ Lunch | FREE | | - |
| CYCLE JERSEY'S | | | |
| 2019 Cycle Jersey – Limited quantity available! (Cycle Jersey only, no bib shorts) Please select your size: <input type="checkbox"/> XS <input type="checkbox"/> SM <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL | \$55 ea | | \$ |
| 2018 Cycle Jersey – Limited quantity available! (Cycle Jersey only, no bib shorts) Please select your size: <input type="checkbox"/> XS <input type="checkbox"/> SM <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL | \$25 ea | | \$ |
| SHUTTLE SERVICE | | | |
| Shuttle Transportation – Please select your preferred time (includes bikes) <input type="checkbox"/> 9:00am for short ride <input type="checkbox"/> 1:00 pick-up from BBQ <input type="checkbox"/> 1:30 pick-up from BBQ | Included | | - |
| Donation If you are unable to attend, any donation would be greatly appreciated! | \$ | | \$ |
| Total | | | \$ |

Method of Payment

Cash Cheque (payable to KGH Foundation) VISA MC AMEX DEBIT

Card Type: Personal Corporate

Credit Card# _____ Expiry Date _____ / _____
MONTH YEAR

Name on Card _____ Signature _____