



Children's Ride 17 Registration

Register for the Pre-ride-registration for **Children's Ride 17** by June 11 and receive a Ride T-shirt and pin. This year the Ride is on **Sunday, June 24, 2012**. You can pre-register online at our website: www.childrens-ride.com. You cannot pre-register at the Harley Dealerships.

A \$30.00 Basic Ride Package registration is required for participation in **Children's Ride 17**. Registration includes a ride pin, no luncheon, live musical entertainment, live and silent auctions.

A \$40.00 Ride Package includes the Basic Ride Package plus catered luncheon and ride patch.

A \$50.00 Pre-Registration Package is available, **only during the Pre-Registration period**, and includes: basic ride package, ride patch, t-shirt, and catered luncheon.

Children's Ride 17 will begin with group rides from sponsoring dealerships to the festivities in Enumclaw. Ride registration and check-in will open at 10:00 a.m. at the Enumclaw Expo Center

Riders who register the morning of Children's Ride (**Sunday, June 24, 2012**) at the Enumclaw Expo Center will receive the Basic Ride Package (no t-shirt or patch) at \$30 per person. Registration is required for participation in Children's Ride 17. **All brands of motorcycles are welcome. Non-riders and families are welcome.**

Ride Registration

Pre -register for Children's Ride 17 by June 11

Basic Ride Package at \$30.00 per person- group ride, pin, live musical entertainment (no lunch)

Number of People			
	x	\$30.00	\$

\$40.00 Pre-Registration Package per person- group ride, patch, pin, catered luncheon, live musical entertainment

Number of People			
	x	\$40.00	\$

\$50.00 Pre-Registration Package per person- group ride, patch, pin, catered luncheon, T-shirt, live musical entertainment

Number of People			
	x	\$50.00	\$

Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

1st Rider							Circle one size	2nd Rider							
Adult T-shirt	S	M	L	XL	XXL*	XXXL*		Adult T-shirt	S	M	L	XL	XXL*	XXXL*	
Passenger Adult T-shirt	S	M	L	XL	XXL*	XXXL*	Circle one size								

Choose the following payment options (Make Personal Check Payable to: The Imagine Guild):

Personal Check: _____ MasterCard: _____ Visa: _____ Discover: _____ American Express: _____

Credit Card Account #: _____ Exp. Date: _____

Signature: _____ Date: _____

Mail to: Seattle Children's Hospital Guild Association- M/S S-200

* Add \$3.00

P.O. Box 5371
Seattle, WA 98145

Fax to: 206-987-4845

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