

Reg Nr: _____



2010 MCR RIDE REGISTRATION

Price: \$15.00 Per Person

First Name _____

Last Name _____

Address _____

City _____

State / Zip _____ / _____

Phone Nr [] _____

Alt Phone Nr [] _____

Email Address _____

Driver: Motorcycle License? Yes No

Passenger Name _____

Passenger: Motorcycle License? Yes No

Motorcycle Mfg _____ Model _____

Driver Signature _____

Passenger Signature _____

Registration \$ _____

Donation to the MCR \$ _____

Total Enclosed \$ _____

Please visit www.gregharrismcr.org to learn more about this worthy facility. Thank you in advance for your generous donation and recognition of the important contributions our troops make to our society. Please mail checks to the address below made payable to: Cicero ALR 787 and include "Military Courtesy Room" in the memo section. You may cut out the address and tape onto your envelope. Thank you.

John McNamara
347 Winks Road
Central Square, NY 13036