

Please Print

CYCLIST'S NAME _____

ADDRESS _____

ZIP _____

TELEPHONE NUMBER _____

I AM CYCLING FOR (AGENCY NAME) _____



	SPONSOR NAME (Please Print)	ADDRESS (Street, Apt. No., Zip)	TELEPHONE NUMBER	AMOUNT PLEDGED	AMOUNT COLLECTED
1.					
2.					
3.					
4.					
5.					
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24.					
25.					
TOTALS					

Generic Sponsor Form



Fulfilling Dreams, Having a Positive Impact on Our Community