**sponsor form
Sponsor's name Address Pledge amt Paid?
 Yes No**

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**Rider signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_

Rider is responsible for collecting pledges.** Suggested minimum: $2 per mile. Make checks payable to **Bike Shenandoah**.
Receipt will be sent to each sponsor who provides an address.