



RIDER: _____ GWRRA #: _____
 CO-RIDER: _____ GWRRA #: _____
 ADDRESS: _____ CITY: _____ STATE: ____ ZIP: _____
 DISTRICT: _____ CHAPTER: _____ First PA Rally: _____
 CURRENT GWRRA POSITION(S) HELD: _____

FULL REGISTRATION INCLUDES: Rally bar and all events Thursday, Friday and Saturday except events with an additional fee

\$15.00 Day Pass will be sold on site and are good for all events the day of purchase
Except: Saturday banquet and events - additional fee listed below

NO FULL REGISTRATIONS OR SATURDAY DAY PASSES with banquet ACCEPTED AFTER MAY 4, 2018

\$100 Cash Drawing for GWRRA Member with full registration postmarked by 01/31/2018 - must be present to win

Full Registration - postmarked by 03/31/2018 GWRRA MEMBERS _____ X \$ 45.00 = \$ _____

NON-GWRRA MEMBERS _____ X \$ 55.00 = \$ _____

Late Registration - postmarked 04/01-05/04/2018 GWRRA MEMBERS _____ X \$ 50.00 = \$ _____

NON-GWRRA MEMBERS _____ X \$ 60.00 = \$ _____


SATURDAY (05/19) - Day Pass with Banquet Postmarked by 05/04/18 _____ X \$ 35.00 = \$ _____

Masters Dinner - Level 4 and above with guest Postmarked by 05/04/18 _____ X \$ 20.00 = \$ _____

Pizza and Pasta Buffett

ARC or TRC Course - limited class size - first paid basis - fee refund after completion of course - co-riders welcome

ARC Course - Date: Friday (05/18) _____ X \$30.00/bike = \$ _____

This Class is full; wait list only  **TRC Course** - Date: Saturday (05/19) _____ X \$30.00/bike = \$ _____ 0.00

TOTAL AMOUNT ENCLOSED: \$ _____

Saturday Banquet Meal: Choose: Beef Burgundy [sliced beef in mushroom & sun-dried tomato sauce] (#) _____

Or: Chicken Picatta [grilled chicken breast in a garlic, lemon & caper sauce] (#) _____

Special Dietary Needs: _____

Make Check payable to: GWRRA PA District

Questions: call Harold/Diane @ 814-589-1307

Send Registration to: Harold and Diane Jackson, 345 Cemetery Road, Pleasantville, PA 16341

I/we agree to hold harmless GWRRA, Co-sponsoring Organizations, and/or any Property Owners for any loss or injury to self or property in which I/we may become involved by reason of, or participation in this event. I/we also agree to assume responsibility for any property I/we knowingly damage.

Check (v) for
Sugar-free Dessert

Rider's Signature: _____ () Date: _____

Co-Rider's Signature: _____ () Date: _____

Cancellations by Mail or E-mail must be received by May 4, 2017. **No cancellations after May 4th.**

There will be a \$10.00 Handling Fee for all cancellations. No Phone cancellations accepted.