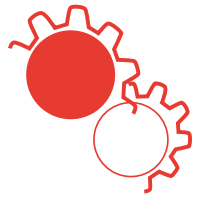




# 2010 REGISTRATION FORM



Please register online/mail/fax:

MS Society, South Vancouver Island Chapter, 1004 North Park Street, Victoria, BC V8T 1C6

www.ms biketours.com tel: 250-388-6496 fax: 250-361-2661

Register me for:  Cowichan Valley Grape Escape, Aug. 14 & 15, 2010\*

\*Choose accommodation (double occupancy) Dorm Room \_\_\_\_\_ or Camping \_\_\_\_\_

I would like to bunk or camp with: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (h) \_\_\_\_\_ (w) \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

By providing my email address, I give the MS Society of Canada permission to contact me by email.

Age:  12 & under  13-17  18-24  25-34  35-44  45-54  55-64  65+

T-Shirt Size:  XS  S  M  L  XL  XXL

All registered participants will be listed online to accept online donor pledges. If you do NOT wish to be listed online as a participant, please check here

When you register you are expected to raise pledges or make a donation. By registering for the RONA MS BIKE TOUR, I give full permission for the use of my name, photograph and funds raised in conjunction with this event, and I understand that it may be used for publication in MS Society annual reports, newsletters or websites.



CREATE A TEAM...  
Create a Future Free of MS

Team Name \_\_\_\_\_

Round up 4 or more of your friends, family and/or co-workers, choose a fun team name (be creative!), appoint a team captain and win great prizes. This is a great way to be active in your community, raise money and have fun.

Are you the Team Captain?

Yes  No

Please send me more information on TeamMS

## Registration Fees\*

• Cowichan Valley Grape Escape

Super Early Bird  
Before Mar. 1/10

\$30

Early Bird  
Before May 31/10

\$40

After June 1/10

\$55

Min. Pledge

\$325

\*Register early to save on entry fees and be eligible for fundraising prizes!

## METHOD OF PAYMENT

Cheque  Cash  MasterCard  Visa  Amex

If paying by cash, please drop off in person. **DO NOT MAIL CASH.**  
Cheques payable to the **MS Society, South Vancouver Island Chapter**

Card #: \_\_\_\_\_ Exp: \_\_\_\_\_ / \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

**Privacy Statement:** The Multiple Sclerosis Society of Canada collects your personal information for the purpose of communicating to you information about the MS Society, its programs and fundraising activities. By completing this form, you acknowledge and consent to the collection and use by the MS Society of your personal information for these purposes. If you have any questions about your personal information or the MS Society's privacy policy, contact our Privacy Officer, Suzanne Jay at 1-800-268-7582 or priv-bc@mssociety.ca. A copy of our privacy policy may be obtained at any MS Society office or at www.mssociety.ca.

**PARTICIPANTS MUST RAISE AND TURN IN MINIMUM PLEDGE AMOUNTS BY EVENT DAY TO PARTICIPATE.**