

2016 Newton's Revenge – Jr. Fee Waiver Program Donations

Name _____

DONOR	ADDRESS	AMOUNT OF DONATION	PAID

Jr. Racers OFFICIAL DONATION FORM

RACE DATE: SATURDAY, July 9th, 2016

Name _____ Age _____

Address _____

City _____ State _____ Zip _____

Telephone (H) _____

Telephone (W) _____

Jr. Fee Waiver Program

- Call the Mt. Washington Auto Road for the Jr. Fee Waiver application and Donation Sheet.
- Fill out the application.
- Fax or mail your application to the Mt. Washington Auto Road by May 15, 2016.
- Mail your donations made out to the Mt. Washington Valley Bicycling Club to the Mt. Washington Auto Road PO Box 278, Gorham, NH 03581 by May 31, 2016.

If you have any question regarding this program, please call Kim Hoyt at (603) 466-3988 or via email at kim@mt-washington.com.

Thank you for participating in the Jr. Fee Waiver Program for Newton's Revenge, and for supporting Mt. Washington Valley Bicycling Club.

www.mwvbc.org
www.mtwashingtonautoroad.com



To list more sponsors, please use a plain sheet of paper and attach.