

**April 19th-25th
2021
VIRTUAL**

**Ride 1 mile or many on
your favorite route in
support of Breast
Cancer prevention!**



BIKE FOR PREVENTION

Please send your collected pledges to the MBCC office at:
Post Office Box 202, Franklin, MA 02038

Your Name _____

Team Name (if applicable) _____

Address _____ City _____ State _____ Zip _____

Phone (day) _____ (evening) _____

E-mail _____

Parent/Guardian signature is needed if participant is under 18

I am participating in honor/memory (circle one) of _____

MY GOAL IS TO RAISE: \$2,500 \$500
 \$1,000 other _____

Please make checks payable to
Massachusetts Breast Cancer Coalition.
Contributions are tax-deductible.
Register on-line at www.mbcc.org/swim

I cannot attend, but I want to support the MBCC with a contribution of \$2,500 \$1,000 \$500 other \$ _____

REGISTRATION FEES (NON-REFUNDABLE): \$25 Student \$40 Individual \$150 Family (up to 5 members)

SPONSOR'S NAME	ADDRESS	CITY/STATE/ZIP	PLEDGE AMOUNT	TOTAL PAID
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				

Special prizes for top fundraisers!

MASSACHUSETTS BREAST CANCER COALITION
PO Box 202, Franklin, MA 02038 • www.mbcc.org • 800-649-MBCC

\$ _____ \$ _____

Total Pledge Total Paid