

ATTENTION! RUN FOR THE SON

CMA MEMBERS IN CHAPTERS OR FORMING CHAPTERS: If you ride with a chapter or forming chapter, please give this completed envelope and monies to the RFS Chapter Secretary on or before the first Saturday of May.

STATE LEADERS AND INDIVIDUALS NOT IN A CHAPTER: Mail RFS monies to **CMA, PO Box 9, Hatfield, AR 71945**. Include a **shipping label** and a **RFS Summary Sheet** if you are not a member of a chapter or forming chapter.

PLEASE DO NOT MAIL CASH OR MAIL THIS ENVELOPE WITH CHAPTER RECAPS.

NAME (use one envelope per person) _____ CMA # _____

CHAPTER NAME _____ CHAPTER # _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____ DAYTIME PHONE _____

Write RFS, your member #, and your chapter # in the memo field on each check.

TOTAL \$ AMOUNT ENCLOSED

\$ _____

Comments: _____



INCENTIVES

DOLLAR LEVEL	INCENTIVES	T-Shirt Size Circle Size for Correct Dollar Level	Incentives Y/N
100	T-Shirt	S, M, L, XL, 2X, 3X, 4X, or 5X	

Items with a CMA logo larger than 3 1/2" are available only to those members who have completed the Member Training course or were members prior to March 1, 1997.

*Those qualifying for a **GOODIE/TOOLBOX CERTIFICATE** will also receive a **T-SHIRT**. Please indicate size above.

**Only one Goodie/ToolBox Certificate will be given for the highest level reached. For example, if you raise \$2,500, you will receive one T-shirt, one \$250 Goodie/ToolBox Certificate, and one \$2,500 patch.

***Only one patch will be given for the highest level reached.

LIABILITY & RELEASE AGREEMENT

In consideration of the furtherance of the purpose, objective, and work of the Christian Motorcyclists Association, (I) (We) undersigned, hereby grant to CMA and all news media covering Run for the Son, permission to use (my) (our) names and/or picture in any media for editorial, educational, promotional, or news-worthy purpose. In consideration of CMA permitting me to participate in the event, I hereby for myself, my heirs, administrator and assigns, waive and release any and all rights and claims of any nature I may have against CMA, and any other organizations sponsoring or connected with this event, their representatives, successors and assigns for any and all injuries or damages of any nature which I may suffer while taking part in any activities connected with the event.

SIGNATURE _____

PARENT'S SIGNATURE _____
(IF UNDER 18 YEARS OLD)

- Please complete the above information, enclose your RFS proceeds, and sign the release agreement.
- Include RFS, your member number, and your chapter number on each check.
- Turn in this packet to the RFS Secretary on or before the first Saturday of May.
- If you are not with a chapter or forming chapter, include a RFS Summary Sheet (*available online at www.cmausa.org or through the CMA Support Center*) and a shipping label.
- Mail your Run for the Son money to CMA postmarked on or before May 20.
- Be sure all information is correct and complete.
- Please do not send sponsor forms to CMA.
- If you have any questions call (870)389-6196.