



EASTSIDE HOG CHAPTER

RIDE FORM

Send to: roadcaptain@eshog.com

Ride Information:

Name of Ride:	
Date(s) of Ride:	
Meet Location:	
Start/End Time:	

Ride Leader Information:

Name:	
E Mail:	
Phone:	
Name of Sweep:	

Ride Description:

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Rate Your Ride: (X) Easy _____ Moderate _____ Advanced _____ Seasoned _____