

BIKE TO WORK REGISTRATION FORM

Ride your bike to work and be eligible to win a Bike & Helmet



I pledge to ride my bike or walk to work at least one day during the week of May 11th—15th, 2009 in San Joaquin or Stanislaus County.

Name: _____

Address: _____

City: _____ Zip Code: _____

Home phone: _____ Work Phone: _____

Email: _____

Employer: _____ Round Trip Commute Miles: _____

Work Address: _____

City: _____ Zip Code: _____

Work Hours: _____ : _____ AM/PM to _____ : _____ AM/PM

Signature: _____

Fax to Commute Connection at (209) 468-9930 by May 20th



Modesto 523-2700