KATY KLASSIC BIKE-A-THON
SPONSORSHIP

Rider's Name _____

We, the undersigned, make the indicated per mile pledge for the named Rider to Liberty Classical School. We understand that after the Bike-a-thon on September 17th (Rain Date: September 24th) Liberty Classical School will send us a certification of the miles ridden by the named Rider and the total amount owed. We will remit that amount to Liberty Classical School.

Name	Address	Email	Amount per mile
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____