

# TCBC Ride Report



Ride Name: \_\_\_\_\_

Leader: \_\_\_\_\_ Member# \_\_\_\_\_

Leader: \_\_\_\_\_ Member# \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Posted miles: \_\_\_\_\_

**Non-member Ride Fees:**  
 \$\_\_\_\_\_ **Leaders:**  
*make your check payable to TCBC. Mail it and this form to:*

**TCBC Ride Reports**  
 PO Box 131086  
 Roseville, MN 55113

**or e-mail to:**  
[ridestats@biketcbc.org](mailto:ridestats@biketcbc.org)

Ride Category: **A A/B B B/C C N/C N/B R O**      No. of Participants: \_\_\_\_\_

**CERTIFIED AND PROPERLY-FITTING HELMETS MUST BE WORN AT ALL TIMES DURING TCBC RIDES.  
 PERSONAL LISTENING DEVICES (MP3 PLAYERS, IPODS, BLUETOOTH EARBUDS, HEADPHONES, ETC.) ARE NOT ALLOWED ON TCBC RIDES.  
 CELL PHONE USE IS NOT ALLOWED WHILE RIDING. PLEASE FIND A SAFE PLACE OFF THE ROAD TO MAKE/RECEIVE CALLS**

**TCBC MEMBERS:** Please establish your membership on-line to sign your yearly waiver.  
**NON-MEMBERS:** You must sign a waiver at every ride and pay the \$2 ride fee to the Ride Leader.  
**MEMBER BENEFITS:** TCBC tracks mileage for all current members. Medical and liability insurance on all TCBC rides.

Member Number	Non Member	Name ( Please print )	Phone ( Area Code & Number )	Actual Mileage	#
					1
					2
					3
					4
					5
					6
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					8
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					10
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					25