

# National Trail Ride Awards Information Sheet

## Trail Ride Information

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

Start Date \_\_\_\_/\_\_\_\_/\_\_\_\_ End Date \_\_\_\_/\_\_\_\_/\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

## Contact Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ EMail \_\_\_\_\_

## Ride Follow Up Report

Number of Riders (Please attach Rider Signup Sheet) \_\_\_\_\_

Problems encountered \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Ride summary comments \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Plans for the future \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Attach rider signup sheet(s) and mail to:**

MFTHBA

PO Box 1027

Ava, MO 65608