



## ***Sponsored Rider Program***

I \_\_\_\_\_ am donating  
(Sponsor Name)

\$100 to sponsor \_\_\_\_\_  
(Rider Name)

Sponsor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

SWIRA Rider Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***\*Please enclose a business card and website information with this form and donation. SWIRA will recognize you on their website, along with contact information for your business!***

Bring complete form and payment to registration on race day or mail to:

SWIRA  
PO Box 188  
Lodi, WI 53555

Any questions, please email [swiraclub@gmail.com](mailto:swiraclub@gmail.com) or call (608)617-8007!