

**TRANS-MONTANA**  
**Snowmobile Charity Ride For**  
**Multiple Sclerosis Association of America**



**TRANS-MONTANA**  
**Snowmobile Charity Ride**  
**For MSAA**

Thank you for your **Pledge** of

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Pledge Amt. \_\_\_\_\_

Participant Name \_\_\_\_\_

\_\_\_\_\_  
Participant Signature



\_\_\_\_\_  
Date



*Make checks payable to:*  
**TransMontana**  
**600 Central Plaza, Suite 13**  
**Great Falls, MT 59401**



501 (c) 3 Charities  
(Save this stub for your records)