

## Go Baja Riding Tours

7740 Indiana Ave, Unit C, Riverside, CA 92504

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### Rider Sign-up Form for Email

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Please fill out all information on this Adobe form using Adobe Reader software. Use **TAB** on the keyboard to jump to next field to fill in. **SAVE** this file on your computer with your name as the filename (i.e. JohnSmith.pdf). Email this pdf document to us today for speedy processing.

Today's Date:

First Name:

Last Name:

Address:

City:

State:

Zip:

Country:

Daytime phone:

Cell phone:

Email:

Emergency Contact Name:

Emergency Contact Phone #'s:

Medical Insurance Company:

Policy #:

Type of Insurance:

Tour date requested:

Tour type:

Arrival Date (in San Diego):

Arrival Time PST:

Airline Carrier and Flight number:

Hotel:

Departure Date:

Departure flight #:

Your skill level is very important to us we need to plan the best ride possible for your specific skill level allowing for safety of all riders. Please **BE VERY HONEST!** If it is determined your level is less than stated below you may be asked to continue your ride in the chase truck.

Check only one:

Beginner - minimum of 2 years **off road** riding experience

Novice - regular current and past years **off road** experience

Intermediate - substantial current and past years **off road** experience

Expert - currently race **off road or motorcross** and have done so for many years

Rental riding gear option needed:      yes                      no

Your size: Shirt/Jersey                      Pants(waist size)                      Boots                      Helmet

Your age:                                      Height:                                      Weight:

**Payment Options:**

**\*\*\*\* We require a \$300.00 deposit to secure your desired ride date. Balance is due 3 weeks prior to the actual ride date. \*\*\*\***

Method of payment:      check                      money order                      credit card (visa or mastercard)



**CALL** us to make payment by credit card. For your security **DO NOT** email credit card information.

Full name on credit card:

Billing address same as listed above?      yes                      no

Billing address:

City                                      State                                      Zip

Edit and save this form to your computer. Email it as an attachment to [bruno@gobajariding.com](mailto:bruno@gobajariding.com)

Thank you!