

WOMEN ON WHEELS®

CUMULATIVE MILEAGE PROGRAM

Every Member Mile Matters!

Women On Wheels® All Member Cumulative Mileage Program Entry/Update Form

Your Name _____ Member # _____ Expiration Date _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email Address _____

Type of Update New/Add Bike Update Existing Bike Ending /Remove Bike

Motorcycle (Brand) _____ (Model) _____ (Year) _____ (cc's) _____

Current Odometer Reading _____ (Miles/Kilometers)

Type of Update New/Add Bike Update Existing Bike Ending /Remove Bike

Motorcycle (Brand) _____ (Model) _____ (Year) _____ (cc's) _____

Current Odometer Reading _____ (Miles/Kilometers)

Questions/Comments, Etc: _____

Your Signature _____ Date _____

Mail to: (Cumulative Mileage Awards Program) - P.O. Box 83076, Lincoln, NE 68501

Questions? Call: (402) 477-1280 or Email: cumulativemileage@womenonwheels.org