



RIDER PROFILE

The National Multiple Sclerosis Society would like to thank you for taking the challenge and agreeing to help the 20,000 Ohioans who are living with the unpredictability of MS. In the upcoming year, we will be telling you the inspirational stories of those living with MS and how the National MS Society has changed their lives. However, at this time we would like to hear *your* story.

The National MS Society would like to know why you have decided to ride in Bike MS. Whether you ride for a friend, a family member, yourself or even just for the cause, we want to hear your story. Every reason is a good reason and your story could help us create media pitches to raise awareness about MS and the importance of raising funds to find the cause and the cure.

Your decision to ride will help those in Ohio who live with MS and we would like to let the whole community know that you are doing it. When you fill out and return the short form that follows, you allow us to send press releases and pitch letters to area media outlets announcing the efforts of people like you. Your story may encourage sponsors, more riders and contributors to the National MS Society.

(Please omit any information you would prefer left out of a release.)

Who You Are:

Name: _____ Age: _____

Address: _____

City, State, Zip Code: _____

Phone: (Home) _____ (Work) _____

Email Address: _____

Please mail this completed form to:
Guyla Wehman
National MS Society
6155 Rockside Rd., Suite 202
Independence, OH 44131

Visit us online at www.MSohiobuckeye.org

Why You Ride:

Name of Team (if applicable):

Are you a first time rider? (Circle one) Yes No

If no, in how many Bike MS events have you participated? _____

If you rode last year, please indicate the amount you raised in pledges.

\$ _____

Which Bike MS event are you participating in? (Please circle)

Bike to the Bay Central Ohio Challenge Pedal to the Point

How did you hear about Bike MS?

Would you be willing to be interviewed by the media to help the MS cause?

(Please circle) Yes No

Name of your local newspaper: _____

Do you have a local media contact? (Please circle) Yes No

If yes, please provide name and contact information: _____

Reason you are riding. (Please write something that could be quoted in the newspaper, i.e., "I believe that the Bike MS event is a great opportunity to make the public aware of MS. As a person with MS, I feel it is important to make sure everyone knows about the disease.")

I give the National MS Society permission to use the above information in any press release and on the Society's website to publicize the Bike MS 2014 event.

Signature: _____

Date: _____