

JUNIOR ROUGH RIDER MEMBERSHIP

We want to make this gift special for your Junior Rough Rider, so please write in their mailing address below.

I WANT TO ADD Please include the number of how many Junior Rough Riders you w	JUNIOR ROUGH RIDER ME ould like to enlist	EMBER(S) A	T \$50 PER MEMBERSHIP
NAME OF JUNIOR ROUGH RIDER		BIR	(THDAY//
ADDRESS	_CITY	STATE	ZIP CODE
PHONEEMAIL			
YOUR NAME If you are not a parent to the JRR, please list your relation to JRR (Ex. John METHOD OF PAYMENT: CHECK	Doe, grandparent) and list parent(s) or legal	guardian.	
CREDIT CARD NUMBER	EXPIRATION DATE_	/VE	RIFICATION CODE
AUTHORIZED SIGNATURE		DATE	
Make Junior Rough Rider	By checking to	•	ou agree that your 60 each vear.

memories forever!

*Card will be charged each year on the day we process your payment until you ask us to stop. Recurring membership donation not available for check or cash payments.

PLEASE INCLUDE THE INFORMATION ADDITIONAL JUNIOR ROUGH RIDERS ON

Membership as a *Theodore Roosevelt Medora Foundation Junior* Rough Rider is for kids 17 & under. All Junior Rough Riders receive:

- A special welcome packet
- Listed in the 2024 Medora Musical Program
- A special birthday message
- NEW age appropriate gifts
- Year designation pin
- A certificate
- JRR of the month
- Newsletter



Questions? Contact Jordin Leier Junior Rough Rider Attaché jordinl@medora.com 701-299-8503



ADDITIONAL JUNIOR ROUGH RIDERS

NAME	BIRTHDAY / /	/ EM <i>/</i>	AIL		
ADDRESS	CITY		STATE	ZIP CODE	
PARENT OR LEGAL GUARDIAN			PHONE		
NAME	BIRTHDAY /	/ EM <i>!</i>	AIL		
ADDRESS					
PARENT OR LEGAL GUARDIAN					
NAME	BIRTHDAY /,	/ EM <i>ł</i>	AIL		
ADDRESS	CITY		STATE	ZIP CODE	
PARENT OR LEGAL GUARDIAN			PHONE		
NAME	BIRTHDAY /,	/ EM <i>/</i>	AIL		
ADDRESS	CITY		STATE	ZIP CODE	
PARENT OR LEGAL GUARDIAN			PHONE		
NAME					
ADDRESS					
PARENT OR LEGAL GUARDIAN					





