Pre-registration Form
One Application per Rider

Last Name_____ First Name_____

Mailing Address_____

City_____ State_____ Zip_____

Date of Birth___/___/___ Male___ Female___ Phone (___) ____-_____

Email Address_____@_____

Adults **$50.00** for weekend
Children **15** and under **$30.00**
Please make check out to **Scott Voorheis** and mail to:

Scott Voorheis
8580 Coles Ferry Pike
Lebanon, TN 37087

Number of Adult Riders: _____ @ $50.00 each*

Number of child riders: _____ @ $30.00 each*

Total: $_____

***No refunds available on pre-registration fees.**

(If paying for multiple riders each rider still must have their own form filled out with his or her information.)

***Please Note: Pre-registration forms must be post marked by:**

October 26, 2025

For more information feel free to contact us:

Scott Voorheis scott@trailpass.com