

Gold Wing Road Riders Association

Chapter PA-V "Black Rose Wings"

Attendance Roster



Event Roster

Event Date: _____

Page _____ of _____

- Type of Event: _____ Chapter/State: _____
- Event POC: _____ Contact Number: _____
- Other POC: _____ Contact Number: _____
- Site Location: City: _____ State: _____

Have Chapter participants individually fill out their information below and submit this to your **Chapter of the year Coordinator Bill Sprenkle** for recording purposes. (717)430-0330

Name	GWRRA Membership #	District/Chapter
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