



Reid BRAvo! Registration Form

Let's make this simple. Every bra entry requires two things:

- Registration Form (this form) and a \$25 registration fee
- Your bra (the decorated bra; must be delivered between August 1 and September 14)

If mailing your bra & registration, please send to:

Reid Hospital Foundation
Attn: Becky Jewison
1100 Reid Parkway
Richmond, IN 47374

If delivering your bra & registration, please drop off the bra and form at:

Information Desk in main lobby
Reid Outpatient Care Center (1100 Reid Parkway; Richmond)
M-F 6 a.m. to 7 p.m. or Sat 8 a.m. to 12 p.m.
Bra should be in a large paper or plastic bag

Online registration is also available at www.ReidBRAvo.org

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email: _____

Number of Bras: _____

If submitting more than one bra; please complete a separate "page 2" for each (next page).

A registration fee of \$25 per bra is required. Please make checks payable to Reid Foundation.



Reid BRAvo! Registration Form (page 2)

Name of Bra: _____

Name of Registrant/Sponsor: _____

Name(s) of Bra Creator(s) (other than registrant): _____

Select one:

Reid can auction/sell my bra to help women in need.

I prefer to have my bra back after the event.

Reid Hospital & Health Care Services and Reid Foundation has permission to utilize my bra, name and likeness in marketing, merchandising and promotional material for Reid BRAvo! I have read, understand and agree to abide by the guidelines listed on the BRAvo! website.

***Signature and box check required** _____

Bra dedication (optional):

Decorated in honor of... _____

Decorated in memory of... _____

BRAvo! Moments (Your inspiration for the bra; please limit to 100 words):
