



## 2020 ANNUAL STATE BENEFIT RIDE

May 14-17, 2020

Host: Legion Post 0046 Burt J. Asper. Chambersburg  
755 Philadelphia Ave, Chambersburg, Pa 17201-1266



Cost is \$30.00 for Rider - \$25.00 for Passenger. **BOTH** include the 2020 State Ride Patch  
(There is a \$5.00 discount for Rider and Passenger if pre-register before May 1, 2020)

**All Riders are welcome, not just ALR members**

This year's funds will go to the *State Commander Robert John's* project:

**The American Legion Veterans and Children Foundation.**

**ALL FUNDS BENEFIT OUR VETERANS AND THEIR FAMILIES.**

**The American Legion Veteran and Children Foundation:** The American Legion has been actively involved in meeting the needs of Legion family members. With a renewed commitment to our Veterans Children by delivering Financial Assistance to those in need.

**Please go to your Post, Auxiliary, Sons and Riders for donations so we can make our State Commander Proud.** And then come out and support our Ride. Bring your non ALR riders friends— everyone is welcome. Come for one day, two or all three. If you can't make a day of it, instead join us at the Legion in the evenings. Make new friends and see some old ones.

Eastern Riders will be leaving from Legion Headquarters

800 North Front Street, Wormleysburg, Pa 17043 @ 10:00 a.m. on Thursday May 16<sup>th</sup>.

Riders can meet up with all of us at Post 0046 that evening.

Please arrive early enough to check in and pick up your packet!

**Deadline for State Ride and hotel reservation (at discounted price)**

**is May 1<sup>st</sup> Hotel reservations:**

***Candlewood Suites*** 231 Walker Road, Chambersburg, Pa 17201 Booking 877-226-3539 Front Desk 717-263-2800

**ALR State Ride 2020** <https://www.ihg.com/candlewood/hotels/us/en/chambersburg/gtycw/hoteldetail>

Any questions please call:

Dave Hochstein 814-241-4618

Mail: CHECKS PAYABLE to PA. American Legion **Marked "State Ride" in Memo Section**

Headquarters @ Box 2324 Harrisburg, Pa 17105

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Rider's Name \_\_\_\_\_ Cell Number \_\_\_\_\_ Home Post (if one) \_\_\_\_\_

Passenger's Name \_\_\_\_\_ Cell Number \_\_\_\_\_ Home Post (if one) \_\_\_\_\_