

# Western New York Trail Riders Inc.- Membership Application

WNYTR  
P.O. Box 349  
Warsaw, New York 14569  
E-Mail : info@WNYTR.com



## APPLICANT INFORMATION

Name :		DOB :	
Address :		Phone :	Cell :
City :		State :	Zip :
E-Mail :			

## FAMILY -HOUSEHOLD\* INFORMATION

Spouse / Significant Other and dependant children under 18 living at home ONLY

*\*(Family-Household) this only includes child under 18 years of age and must reside in the same household.*

Spouse/SO Name :	
Child's Name :	Age:
Child's Name :	Age:
Child's Name :	Age:
Child's Name :	Age:

## EMERGENCY CONTACT INFORMATION

Name :	Phone :
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## ATV INFORMATION & INSURANCE INFORMATION

**Must attach a copy of current registrations and current insurance ID cards**

**MEMBERSHIP FEES - Make Checks or Money Orders Payable to WNYTR Inc.**

<input type="checkbox"/> Single Membership \$50.00	WNYTR Has 2 Trail Systems	<input type="checkbox"/> YES ! Add me to the WNYTR Contact list
<input type="checkbox"/> Family Membership \$100.00	Where will you primary Ride	Many Members of WNYTR club ride all year round at
ALL SxS's (UTV) are classified as Family Membership	<input type="checkbox"/> Orangville Trail	at other trails and invite anyone to come along, this list will
	<input type="checkbox"/> Tildon Hill Trail	be distributed and used for this purpose.

## ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY, HOLD HARMLESS AND INDEMNITY AGREEMENT

**Must be signed by all members prior to participating in any ride event.**

Applicant Signature	Print Name :	Date :
Spouse / SO Signature	Print Name :	Date :

Paper copies are uncontrollable. This Application and Fee's are only valid at time of printing.