

KI RIDERS ATV CLUB
PO BOX 384, BROWNVILLE JCT, ME 04415
www.kiridersatvclub.com

MEMBERSHIP APPLICATION FORM

\$20.00 Primary Membership _____
 \$2.00 Spouse _____
 \$2.00 Family Member _____
 \$2.00 Family Member _____
 \$2.00 Family Member _____
 \$15.00 Assoc. Membership _____
 \$10.00 club hat or t-shirt _____
 \$ _____ donation to club _____
\$ _____ Total Due Check Cash

Membership must be renewed by June 1st of each year

Please Print Clearly

Primary Club: _____
Associate Club: _____
Name: _____
Mailing Address: _____
Town/City: _____ State: _____ Zip: _____
Date of Birth: ___ / ___ / ___ Phone: _____ Fax: _____
Email: _____

Areas of interest:

Trail work Any Equipment Land owner relations
 Safety Training Search and Rescue Board/committees Fundraising
 Activities/Events Help where needed

I understand that by signing this form, my membership can be discontinued at any time if the Club or it's officers have reason to believe that I or a member of my family operates an ATV irresponsibly so that it endangers the landowner/club relationship or if it is believed that the operator could cause harm to another individual. My membership fee is non-refundable and is intended to be used to support the club as a whole. I also agree to hold harmless the KI Riders Club from all liabilities resulting from my involvement with the Club.

SIGNATURE: _____
DATE: _____