

Tri-County ATV Recreation & Rescue Membership Application

Membership Season April 1st —March 31st

Expanded Membership \$250.00*

Includes 1 Quad Tag (additional tags are \$5 each)

Includes 1 Vehicle Tag (additional Tags are \$5 each)

*memberships may include husband, wife and children under the age of 18 living in the same household.

Primary Member Information

| | | | |
|------------------------|--|------------------------|--|
| First Name: | | Last Name: | |
| Address: | | | |
| City: | | State: | |
| | | Zip Code: | |
| Phone Number: | | Email Address: | |
| Driver License Number: | | Drivers License State: | |

Family Member Information

| | | | |
|-----------------|--|--------------------------|--|
| Spouses Name: | | | |
| Dependant Name: | | Dependant Date of Birth: | |
| Dependant Name: | | Dependant Date of Birth: | |
| Dependant Name: | | Dependant Date of Birth: | |
| Dependant Name: | | Dependant Date of Birth: | |
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| Dependant Name: | | Dependant Date of Birth: | |
| Dependant Name: | | Dependant Date of Birth: | |
| Dependant Name: | | Dependant Date of Birth: | |

Emergency Contact Information

| | | | |
|---------------|--|------------|--|
| First Name: | | Last Name: | |
| Address: | | | |
| City: | | State: | |
| | | Zip Code: | |
| Phone Number: | | | |

Tri-County ATV Recreation and Rescue Membership Applica-

TOW Vehicle Information

| | | | | | | | |
|---------------|--|--------|--|--------|--|--------|--|
| Year: | | Make: | | Model: | | Color: | |
| Plate Number: | | State: | | | | | |

ATV Information

| | | | | | |
|-------|--|--------|--|--------------------|--|
| Make: | | Model: | | DCNR Plate Number: | |
| Make: | | Model: | | DCNR Plate Number: | |
| Make: | | Model: | | DCNR Plate Number: | |
| Make: | | Model: | | DCNR Plate Number: | |
| Make: | | Model: | | DCNR Plate Number: | |
| Make: | | Model: | | DCNR Plate Number: | |

Waiver Information

I, the undersigned, do hereby acknowledge receipt of a copy of, and agree to abide by, all Tri-County ATV Recreation & Rescue Association rules and regulation, I also acknowledge the risk of injury to my person or property and to others while riding, patrolling, practicing or competing on all Tri-County ATV Recreation & Rescue Association authorized property. I know and understand that off road riding is an extremely dangerous sport and I will rely on my own judgment and ability and assume all risk of injury or damage while on Tri-County ATV Recreation & Rescue authorized property. I will not file suit against Tri-County ATV Recreation & Rescue Association, its officers, its members or the landowner. I understand this membership is valid from April 1st of the current calendar year through March 31st of the following year (NO EXCEPTIONS).

| | | | |
|---------------------------|--|-------|--|
| Primary Member Signature: | | Date: | |
| Spouses Signature: | | Date: | |

Additional Information

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|---|
| Time/Talent: Please list any professions, talents, business, etc. That you would like to share with us. |
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Make all Checks Payable to: NO REFUNDS
Tri-County ATV Recreation and Rescue Association, Inc., P.O. Box 29, Heilwood, PA 15745
For additional information—Please Call: 1-877-WE12ATV (931-2288)