

# Membership Application Form

Club Dues are \$25 Single and \$30 Family per year

## Member Information:

Name: \_\_\_\_\_ Partner Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Membership Type: Single ( ) Family ( )

New Membership ( ) or Renewal ( )

## ATV/UTV Information:

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Color: \_\_\_\_\_

Year: \_\_\_\_\_

Lic. Plate: \_\_\_\_\_

Side by Side: Yes ( ) N ( )

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Color: \_\_\_\_\_

Year: \_\_\_\_\_

Lic. Plate: \_\_\_\_\_

Side by Side: Yes ( ) N ( )

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Color: \_\_\_\_\_

Year: \_\_\_\_\_

Lic. Plate: \_\_\_\_\_

Side by Side: Yes ( ) N ( )

Registration is January 1<sup>st</sup> through December 31<sup>st</sup> Early registration is October 15<sup>th</sup>

\*Please use back for any additional machines

## Additional Information:

Name of Members: \_\_\_\_\_

Application Date: \_\_\_\_\_

Do you want your information available to the membership? Yes ( ) N ( )

Please mail completed form with a check made payable to *Outback Riders Inc.* to:

1227 Jersey Swamp Road

Morrisonville NY 12962

P: (518) 563-2010 E: carrieme355@charternet

