



Application for membership in the Southeast ATV Riders Association

Please complete the following application and forward to:

Tim Sheerer
 4666 Salem's Way
 Medina, Ohio 44256

-OR-

South East ATV Riders Association
 P.O.Box 145
 Chagrin Falls, Ohio 44022
 Web Site: www.seatvclub.com

Personal Information

Name: _____
 Address: _____
 City/State/Zip _____
 Home Phone: (____) _____
 Cell Phone: (____) _____
 Work Phone: (____) _____
 Email: _____
 Date of Birth: _____

Membership Type

Single \$50.00 per year
 Family \$85.00 per year

For family memberships, please list the names and ages of family members that ride:

Annual membership renewal is in October

EMERGENCY CONTACT INFORMATION

Name: _____
 Phone: (____) _____

This information is required in case of injury during a Club function

How do you prefer to receive correspondence?
 (newsletters, club rides, etc.)

Postal Mail (USPS)

Email (please provide email address)

Please tell us a little about yourself

Riding Ability: Beginner Intermediate Experienced
 Type of Riding: Sand Mud Trails Technical All
 Have you taken an ATV safety course: Yes No
 Favorite Places to Ride: _____
 _____ _____

Please list the ATV's you own:

Make	Model	Year	Color
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

How did you here about our club

Activities conducted by the SOUTHEAST
 ATV RIDERS ASSOCIATION are made
 possible through the efforts of members who
 invest time and energy in their club.

May we call on you to help with Club
 activities?

YES
 NO

Read carefully before signing:

I the undersigned apply for membership in the SOUTHEAST ATV RIDERS ASSOCIATION and does hereby agree to abide by all club rules and by-laws. I also acknowledge the risk of injury to person and damage to my property while participating in ATV events. I will rely on my own judgment and ability while participating in club events and assume all risks of injury or damage arising out of such participation. I will not sue or make any claim whatsoever against the SOUTHEAST ATV RIDERS ASSOCIATION, nor its officers, nor to any organizers of club events as a result of such participation.

SIGNATURE: _____

Date: _____

For Club Use Only

Membership #: _____ Date Paid: _____ Amount: _____ Check #: _____ Approved: _____