



PINCKNEY TRAIL RIDERS ASSOCIATION

MEMBERSHIP FORM

Pinckneytrailriders.com

501(c) #11-3840359

Membership year Jan. 1st – Dec. 31st

New\_\_\_ Renewal\_\_\_

Single \$20/yr\_\_\_ Family \$25/yr\_\_\_ Business \$50/yr\_\_\_

I own (or lease) a horse\_\_\_

Name: \_\_\_\_\_ Spouse name: \_\_\_\_\_

Address: \_\_\_\_\_ Children name: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Business name: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

You will receive PTRA newsletter by email if provided or by USPS if not provided.

I would be interested in helping with the following:

\_\_\_ Board Member \_\_\_ Clinics/Events \_\_\_ Newsletter \_\_\_ Trail Work

OPTIONAL TRAIL MAINTENANCE DONATION

\$50\_\_\_ \$40\_\_\_ \$30\_\_\_ \$20\_\_\_ \$10\_\_\_ \$\_\_\_\_\_ OTHER

Donations are tax deductible, IRS #11-384035901

Make checks payable to:

PTRA  
11185 Country Ln.  
Pinckney, MI 48169

I hereby release Pinckney Trail Riders Association and its officers and directors of any and all liabilities for personal loss/injury, and/or property loss/damage of any kind. I accept all responsibility for myself, family members, and personal property. Parent or Legal Guardian signature required for children under 18 years of age.

Signature \_\_\_\_\_ Date \_\_\_\_\_

REFERRED BY: \_\_\_\_\_