



PINCKNEY TRAIL RIDERS ASSOCIATION

MEMBERSHIP FORM

Pinckneytrailriders.com

501(c) #11-3840359

Membership year Jan. 1st – Dec. 31st

TRAIL RIDERS

New Renewal

For Administrators Only:

Payment Made Via

Added to Membership List

Sent Payment to BTRA

Single \$20/yr Family \$25/yr Business \$30/yr

Joint Membership with Brighton Trail Riders Association

(circle one: Single \$30/yr or Family \$40/yr)

I own (or lease) a horse

Name: _____ Spouse name: _____

Address: _____ Children name: _____

City: _____ State: _____ Zip: _____ Business name: _____

For Business Members - Business website: _____

Take photo of your business card and email it to pinckneytrailrider@yahoo.com to be included on promotional materials and the PTRA website.

Phone: Home Cell Email

I do NOT want to be included on the list of members who receive PTRA group email notices.

I would be interested in helping with the following:

Board Member Clinics/Events Newsletter Trail Work

OPTIONAL TRAIL MAINTENANCE DONATION - Donations are tax deductible, IRS #11-384035901

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

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: