



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 \$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: _____

For Administrators Only:

Payment Made Via _____

☐ Added to Membership List

☐ Sent Payment to BTRA