



ALL SEASON RIDERS ATV CLUB

MEMBERSHIP FORM

www.allseasonriders.com

Single:____\$30.00

Family:____\$50.00

Sponsor:____\$100.00

Make checks payable to: **All Season Riders ATV Club**

Send check and form to: P.O. Box 284 Elkhorn, WI 53121

Name:_____

Business (Sponsor):_____

☐ If renewal and member info has not changed please check here and your done

Address:_____

City: _____ State:_____ ZIP:_____

Phone number:_____

E-mail address: _____

☐ The Club maintains and provides a list of member's contact info (phone & e-mail). This is done so members can contact each other to arrange rides & events on short notice. If you desire to be excluded from list, check this box.

Our meetings are held the 4th Thursday of the Month unless there is a Club Ride planned OR it conflicts with a Holiday. The Year kicks off with meetings held February thru November and a Winter Party in late February. Monthly newsletters are provided via e-mail.

Check the website calendar for event details. www.allseasonriders.com

2nd member info if family membership:

Name:_____

Address:_____

City: _____ State:_____ ZIP:_____

Phone number:_____

E-mail address: _____