



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___

I own (or lease) a horse___

Name: _____ Spouse name: _____

Address: _____ Children name: _____

City: _____ State _____ Zip _____ Business Name: _____

Business Website: _____

BUSINESS MEMBERS: Take photo of your business card and email it to pinckneytrailrider@yahoo.com or text to; 734-878-2975 to be included in the newsletters and on our website.

Phone: Home _____ Cell _____ Email _____

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

I prefer not to receive any communications

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: _____

Save and email to pinckneytrailrider@yahoo.com