

March 1, 2022– The last day of February 2023 Membership Application

Membership Type

New
 Renewal

Single
 Family
 Business

\$15
 \$25
 \$40

Payment Received

Cash _____ By _____
 Check _____ By _____

Name _____ Name _____

(Household Only)

Child Riders/Ages: _____

Address: _____ City: _____ State/Zip: _____

Our Newsletter comes out once a month and provides information about upcoming events, club rides and other information. To save on printing and mailing costs, we would like to send you the newsletter via email

Emails: _____

Business Memberships ONLY

Would you like to host meetings?
 Would you like to participate in a Monthly Ride?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Phone Number: _____

Acknowledgement and Acceptance of Risk: I agree to abide by all the stipulations set forth in the by-laws of the club and agree to hold the club and all members harmless with regards to any possible injury incurred related to club functions. My signature also acknowledges the possible risk of injury to my person and property while attending club sponsored ATV events. I will rely on my own judgment and ability while participating in club events and assume all risks of injury or damage arising out of such participation. I understand and acknowledge that the activities which I voluntarily engage in as a participant bears certain known risks and unanticipated risks which could result in injury, death, illness disease, physical or mental damage to myself, property, spectators, or third parties. I, being aware of these risks, agree and promise to accept and assume all responsibilities and risks for injury, death, illness, disease or damage to myself or my property arising from my participation in the activity.

My participation in this activity is purely voluntary, and I elect to participate in spite of the known and unknown risks.

Release: In consideration of the services and/or property provided, I, for myself and any minor child for which I am the parent, legal guardian, or otherwise responsible, any heirs, personal representatives, or assign, do hereby release the club, its principles, directors, officers, agents, members, and volunteers from any liability and waive any claim for damage arising from any cause whatsoever. I will not sue or make claim against the club, members, officers, and its organizers, sponsors of rides or events, as a result of such participation. I, the undersigned, waive all rights from accident or injury while participating in any event sponsored by the club and its sponsors.

I have read and fully understand and accept the above statements:

Applicant Signature _____ Date _____
 Other Signature _____ Date _____
 Legal Guardian Signature _____ Date _____

Please return application and payment to: OADRiders PO Box 458 Osseo, WI 54758