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# Parrish Highlanders ATV Club

## Membership Application/Renewal

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Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ E-mail \_\_\_\_\_

- Membership - \$15
  - Association - \$50
  - NEW
  - RENEWAL
- SEE REVERSE SIDE —

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Make check payable to: Parrish Highlanders ATV Club  
Mail to: P.O. Box 23, Gleason, WI 54435

— *Read Carefully Before Signing* —

The undersigned applies for membership in the Parrish Highlanders ATV Club and does hereby agree to abide by all club rules and bylaws. I also acknowledge the possible risk of injury to my person and property while attending club sponsored ATV events. I will rely on my own judgement and ability while participating in club events and assume all risks of injury or damage arising out of such participation. I will not sue or make claim whatsoever against the Parrish Highlanders ATV Club, members, or officers.

Adult Signature \_\_\_\_\_ Date \_\_\_\_\_