
Parrish Highlanders ATV Club

Membership Application/Renewal

Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ E-mail _____

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

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 _____