

WHITE MOUNTAIN OPEN TRAILS ASSOCIATION

Membership Application

Name First: _____ Last: _____

Phone Home: _____ Cell: _____ Work: _____

Email: _____

Name First: _____ Last: _____

Phone Home: _____ Cell: _____ Work: _____

Email: _____

Address Mailing: _____

City: _____ State: _____ ZIP Code: _____

Physical address if different than mailing: _____

City: _____ State: _____ ZIP Code: _____

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Emergency Contact Information

Required, preferably someone who does not normally ride with you.

Name First: _____ Last: _____

Relationship: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Phone Home: _____ Cell: _____ Work: _____

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Membership dues are \$20 for a single, \$30 for couple or family, \$100 for business per calendar year and are not pro-rated for partial year memberships. Renewal memberships are due April 1st of each year.

Please indicate the type of membership: New () Renewal ()

Single \$20 () Couple \$30 () Business \$100 ()

Completed membership form and Release and Hold Harmless Agreement signed and dated by each adult and fees should be mailed to:

WHITE MOUNTAIN OPEN TRAILS ASSOCIATION
P.O. BOX 833 SHOW LOW, AZ 85902-0833

WMOTA Member Release of Liability 117-2

I certify and stipulate that I recognize that riding an ATV/UTV is a hazardous activity that can result in serious personal injury or death. I accept the risks inherent to riding with a group including, but not limited to: obstacles on and off the roads and trails; rapidly changing weather; limited visibility; variations of slope and steepness that can be encountered on and off the trails; surface or subsurface conditions and hidden obstacles on and off trails; collisions with other ATVs/UTVs or other vehicles including those of other riders, and collisions with devices used by land managers to mark the boundaries of trails or roads.

In consideration of my participation in any activities, events, rides or trail improvement activities, I hereby release and agree to hold harmless, indemnify and forever discharge the White Mountain Open Trails Association, Inc., its officers, directors, ride leaders, assistant ride leaders, committee members, employees and agents from all claims, injuries or liabilities caused by or created by my participation.

I hereby certify that any vehicle I operate on WMOTA-sponsored rides will be properly licensed, street-legal, is in good condition, and will have a state OHV permit valid in Arizona affixed to its license plate. I also certify that any such vehicles I may chose to operate will have medical and liability insurance coverage sufficient to adequately protect myself plus any and all passengers, as well as others I might injure.

I have carefully read this agreement and the release of liability it executes and I fully understand its contents. I am aware that this release of liability is a contract between the White Mountain Open Trails Association, Inc., and myself. I sign it in mutual consideration of the association allowing me to participate in its activities, and do so of my own free will. If I bring minor children to any association event and want them to be able to participate, I will sign a guest waiver form for each, listed by name, certifying that I am their parent or legal guardian (permanent or temporary) and that I am therefore able to bind them to the same release of liability as I hereby bind myself.

Name: First _____ **Last** _____

Signature: _____

Date: Month: _____ **Day:** _____ **Year:** _____

Name: First _____ **Last** _____

Signature: _____

Date: Month: _____ **Day:** _____ **Year:** _____