

FULLY UNDERSTAND THE TERMS THEREOF.

Signature:

## MSTA MEMBERSHIP FORM



Date: \_\_\_\_\_

INDIVIDUALMEMBERSHIP - \$45.00 / FAMILY MEMBERSHIP - \$55.00 (Includes spouse/partner and children 18 years and younger still living at individual member parent's address.)

PLEASE SUBMIT OR MAIL THIS MEMBERSHIP AND RELEASE FORM WITH YOUR PAYMENT. PLEASE PRINT LEGIBILY. CHECKS CAN BE MADE OUT TO MOUNTAIN STATES TRIALS ASSOCIATION.

| Member/Family Name:  |   |  |  | <u>_</u>   |  |
|--|---|--|--|--|--|
| Mailing Address:   |   |  |  |  |  |
| City, State, ZIP:  |   |  |  | <u></u>  |  |
| Phone Numbers: Home: Work: Mobile: _   |   |  | obile:   |  |  |
| Member Name  | Age   | AMA Member #   | AMA Membership Exp.  | Birthday   |  |
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| I, (member/parent and/or guardian)   |   |  |  |  |  |
| lands to be used by MSTA of and from kind and nature whatsoever, which I e may hereafter have by reason of any in competitions, events, preparation of everganized by or associated with the MSC connected with this event for damages of liability, MSTA agrees to allow the further understood and agreed that this preparation of event, training session, provided the MSTA. Further, I, the undersity years of age, assume all responsibility agree to hold harmless the Mountain Schosting and running the events, competents. | ver had or now jury or harm wents, training so STA. I assume incurred as a rundersigned to release of liaboractice session gned member, for my own an tates Trials Assistitions, practice | whave or may in the further which may occur to me dessions, practice session all risks of loss and he esult of my negligence or participate in competibility shall be a continuous or other similar event as parent and/or legal d my family member's sociation, its officers, especiation, its officers, especially and the function of the same and the sa | ture have, or which my heirs, of as result of, or during the cours ons or other similar events sporeby agree to reimburse all cost. In consideration of the foregetions, events, training sessions ing one and shall apply to each a sponsored by, conducted by, guardian of my family member activities at any and all MST, event organizers, landowners, a | executors or administrators are of my participation in an innsored by, conducted by, sets to those persons or agreement and release and practice sessions. It is an and every event, organized by or associated ar(s) under eighteen (18) A sponsored events and |  |
| MSTA competing member requiremen   |   |  |  |  |  |
| <ul> <li>Maintain current American M</li> <li>Follow USFS, BLM, laws of occurring, MSTA, and private</li> <li>Participate in MSTA operation</li> </ul>   | f the State of<br>te landowne   | Colorado and any rules.  | applicable laws in the sta   | ate where event is   |  |
| MSTA member privileges:  |   |  |  |  |  |
| • Eligibility for MSTA events and c  | hampionship   |  |  |  |  |
| • Access to MSTA riding areas I CERTIFY THAT I HAVE READ TH  | HE FOREGOI  | NG AGREEMENT AN  | ID RELEASE OF LIABILITY  | IN FULL AND THAT I   |  |